Case 16-2032	25 Doc 1	Filed 06/22/16 Document	Entered 06/22/16 11:01:50 Desc Main Page 1 of 104 F	l
Fill in this information to iden	tify your case:		Page 1 of 104 LATES BANKRUPTCY COURT UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS	
United States Bankruptcy Cour	t for the:		JUN 22 2016	
Northern District of Illinois				
Case number (If known):		Chapter you are filir ☑ Chapter 7 ☐ Chapter 11	JEFFREY P. ALLSTEADT, CLERK	
		Chapter 12 Chapter 13	Check if this is amended filing	
Official Form 101				
Voluntary Pet	ition fo	r Individua	ls Filing for Bankruptcy	12/15
the answer would be yes if either Debtor 2 to distinguish between same person must be Debtor 1  Be as complete and accurate as	er debtor owns a n them. In joint c in all of the form possible. If two reded, attach a s	you to ask for information car. When information ases, one of the spouse s.	one. A married couple may file a bankruptcy case together—on from both debtors. For example, if a form asks, "Do you ov is needed about the spouses separately, the form uses <i>Debto</i> s must report information as <i>Debtor 1</i> and the other as <i>Debto</i> g together, both are equally responsible for supplying correcm. On the top of any additional pages, write your name and c	wn a car," or 1 and or 2. The
	About Debtor	· 1·	About Politon 2 (Common Cultimate)	
1. Your full name			About Debtor 2 (Spouse Only in a Joint C	(ase):
Write the name that is on your government-issued picture identification (for example, your driver's license or	MARCUS First name		First name	
passport).	Middle name HUGHES		Middle name	
Bring your picture identification to your meeting with the trustee.	Last name		Last name	· · · · · · · · · · · · · · · · · · ·
	Suffix (Sr., Jr., II,	III)	Suffix (Sr., Jr., II, III)	
. All other names you	MARCUS	ર્જ્સિટલાના એજ ત્યા ને જ્યારી મારે જે દી કાર્યક લાગ્યા લાગ્યાના કુલ્લા કરવા પ્રત્યાના કુલિયા કાર વાગ્યાના માટા ત્યારા કુલિયાના કુલિય	The particular of the security	
have used in the last 8 years	First name		First name	
Include your married or maiden names.	Middle name HUGHES-B	EY	Middle name	
	Last name		Last name	
	First name		First name	
	Middle name	4444	Middle name	
	Last name		Last name	·
A Minister resident production and the second state of the second	and the section and the confidence of the section o	alan kantan mengang di antanggan pelangan di antanggan pelanggan pelanggan pelanggan pelanggan pelanggan pelan Pelanggan pelanggan		
Only the last 4 digits of your Social Security	xxx - xx	<u>4</u> 3 5 7	xxx - xx	me parties de production de la constitución de la constitución de la constitución de la constitución de la cons
number or federal Individual Taxpayer	OR		OR	
Identification number	9 xx - xx -		9 xx - xx	:
fficial Form 101	n den for transportung and an extra state of the section of the se	en e		Paratratististististististististististististist

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Debtor 1	MARCUS	HUGHES		Case number (if Anown)
	First Name Middle I	Name Last Name	- William	(a recover)
kalania eta kokata eleminia erkailea arreng	et de seus anno anno anno anno anno anno anno ann	No the state of th	et kannenna sunnan kalandari kannakar, kannas sunnakar, kikalanda kannas sunnya progra	g the rich house control program, a trained on a block of all lands of polymores to the flavorest control to the control program of the c
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Cas-
and En	usiness names nployer ication Numbers	☑ I have not used any busing	ess names or EINs.	☐ I have not used any business names or EIN
(EIN) y	ou have used in	N/A		
the las	t 8 years	Business name		Business name
	trade names and			
donig bi	usiness as names	Business name		Business name
				_
		EIN		EIN
		EIN		EIN
5. Where	you live	t Kirikalahan mengangan pengangan pengangan pengangan pengangan pengangan pengangan pengangan pengangan pengan		If Debtor 2 lives at a different address:
		7647 \$1 0 4111 1514 0 000		
		7617 N PAULINA STRE	El	Number Street
				Nambol Street
		CHICAGO City	IL 60626	
		,	State ZIP Code	City State ZIP (
		COOK		
		County		County
		If your mailing address is diff above, fill it in here. Note that any notices to you at this mailir	the court will send	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		N/A		
		Number Street		Number Street
		P.O. Box		P.O. Box
		City	State ZIP Code	City State ZIP C
Why you	are choosing	Check one:	19-derlande en er sjort derhanet of de da damener van de sam jamb gerage, yn gestadieg je ge	The data manufacture and the state of the st
this dist	rict to file for tcy	Over the last 180 days befor I have lived in this district lor other district.	re filing this petition, nger than in any	Over the last 180 days before filing this petitio I have lived in this district longer than in any other district.
		l have another reason. Expla (See 28 U.S.C. § 1408.)	ain.	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)
			**************************************	
		***************************************		
			***	74.44.44.44.44.44.44.44.44.44.44.44.44.4

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Debtor 1 MARCUS HUGHES Case number (if known)\_ Part 2: Tell the Court About Your Bankruptcy Case 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Bankruptcy Code you are choosing to file Chapter 7 under Chapter 11 Chapter 12 ☐ Chapter 13 8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. ☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). ☑ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for **⊿** No bankruptcy within the last 8 years? District MM / DD / YYYY When MM / DD / YYYY MM / DD / YYYY 10. Are any bankruptcy No cases pending or being Yes. filed by a spouse who is Debtor Relationship to you not filing this case with When Case number, if known you, or by a business MM / DD / YYYY partner, or by an affiliate? Debtor Relationship to you District When Case number, if known\_ MM / DD / YYYY 11. Do you rent your No. Go to line 12 residence?

Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?

No. Go to line 12.

Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

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De	ebtor 1 MARCUS First Name Middle Na	ıme	HUGHES Last Name	Case number (if known)	
P	Report About Any	Busines	ses You Own as a S	iole Proprietor	
12.	. Are you a sole proprietor of any full- or part-time		Go to Part 4.		
	business? A sole proprietorship is a	<b>∟</b> Yes	s. Name and location of l	business	
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or		Name of business, if any		
	LLC. If you have more than one		Number Street		
	sole proprietorship, use a separate sheet and attach it				
	to this petition.		City	State ZIP Code	
			Check the appropriate	box to describe your business:	
			Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))	
			☐ Single Asset Real I	Estate (as defined in 11 U.S.C. § 101(51B))	
			☐ Stockbroker (as de	fined in 11 U.S.C. § 101(53A))	
				(as defined in 11 U.S.C. § 101(6))	
			None of the above		
	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	most reany of ti	<i>appropriate deadlines. I</i> cent balance sheet, state	1, the court must know whether you are a small business fyou indicate that you are a small business debtor, you ement of operations, cash-flow statement, and federal in exist, follow the procedure in 11 U.S.C. § 1116(1)(B).	must attach your
	For a definition of small business debtor, see			er 11, but I am NOT a small business debtor according	to the definition in
	11 U.S.C. § 101(51D).		the Bankruptcy Code.		
		→ Yes.	f am filing under Chapte Bankruptcy Code.	er 11 and I am a small business debtor according to the	definition in the
aı	rt 4: Report if You Own o	or Have	Any Hazardous Proc	perty or Any Property That Needs Immediate	Attantion
		· · · · · · · · · · · · · · · · · · ·		The state of the s	Attention
	Do you own or have any property that poses or is	Z No			
á	alleged to pose a threat of imminent and	☐ Yes.	What is the hazard?		
	dentifiable hazard to public health or safety? Or do you own any				
F	property that needs mmediate attention?		If immediate attention i	s needed, why is it needed?	
ti ti	For example, do you own perishable goods, or livestock hat must be fed, or a building hat needs urgent repairs?				
			Where is the property?		
				Number Street	
					1944
				City State	ZIP Code

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Debtor 1

MARC	US
First Name	Middle Mag

HUGHES

Case number (if known)	
------------------------	--

Part 5:

### Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

l am	not	required	to receive a	briefing	about
			because of		

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

### am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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De	btor 1 MARCUS First Name Middle Na	HUGHES Last Name	Case number (if kno	wn}
Pa	art 6: Answer These Que	estions for Reporting Purpose	es	
16.	What kind of debts do you have?	16a. <b>Are your debts primaril</b> as "incurred by an individual	y consumer debts? Consumer debt primarily for a personal, family, or hous	ts are defined in 11 U.S.C. § 101(8)
	you nave?	No. Go to line 16b.  Yes. Go to line 17.	,	стого разрово.
		16b. <b>Are your debts primaril</b> money for a business or inve	y business debts? Business debts a estment or through the operation of the	are debts that you incurred to obtain business or investment.
		✓ No. Go to line 16c.  ✓ Yes. Go to line 17.		
		16c. State the type of debts you c	owe that are not consumer debts or busi	iness debts.
17.	Are you filing under Chapter 7?	☐ No. I am not filing under Cha	pter 7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	✓ No	7. Do you estimate that after any exem are paid that funds will be available to d	pt property is excluded and listribute to unsecured creditors?
;	How many creditors do you estimate that you owe?	✓ 1-49 □ 50-99 □ 100-199 □ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	25,001-50,000 50,001-100,000 More than 100,000
•	How much do you estimate your assets to be worth?	✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$100 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion  More than \$50 billion
e	How much do you estimate your liabilities o be?	□ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion
ar	77: Sign Below		— \$100,000,001-\$500 Hingori	☐ More than \$50 billion
For	you	If I have chosen to file under Chapt	declare under penalty of perjury that the ter 7, I am aware that I may proceed, if a derstand the relief available under each	aligible under Chenter 7, 44,40, au 40
		If no attorney represents me and I of this document, I have obtained and	did not pay or agree to pay someone wheread the notice required by 11 U.S.C. §	no is not an attorney to help me fill out
			he chapter of title 11, United States Coo	• •
		I understand making a false statem with a bankruptcy case can result in 18 U.S.C. §§ 152, 1341, 1519, and	Tines up to \$250,000, or imprisonment	noney or property by fraud in connection for up to 20 years, or both.
		* Marcus stryh	E. X	
		Signature of Debtor 1 // Executed on 6 2/20	Signature o	
V - 45,	m Brander and a superior and a super	MM / DD / YYY'	Y . 1111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 - 111 -	MM / DD /YYYY

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Debtor 1	MARCUS First Name Middle Nam	HUGHES Last Name	Case number (if known)_		was a second of the second of
For your represen	attorney, if you are ted by one	I, the attorney for the debtor(s) named in the toproceed under Chapter 7, 11, 12, or 13 available under each chapter for which the the notice required by 11 U.S.C. § 342(b) at the object of the control	nis petition, declare that I have inf of title 11, United States Code, ar person is eligible. I also certify the and, in a case in which 8 707/b)/4	ormed the of have extend have	debtor(s) about eligibility splained the relief delivered to the debtor(s)
by an atte	e not represented orney, you do not	knowledge after an inquiry that the information	tion in the schedules filed with the	e petition i	s incorrect.
need to f	ile this page.	x <sub>N/A</sub>	Date		
		Signature of Attorney for Debtor	Date	MM /	DD /YYYY
		Printed name			
		Firm name			
		Number Street			
		City			
		Only	State	ZIP Code	
		Contact phone	Email address		
		Bar number	State		

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		Document	Page 8 of 104
Debtor 1	MARCUS First Name Middle Name	HUGHES e Last Name	Case number (# known)
bankrup attorney		should understand that many themselves successfully. Bed	idual, to represent yourself in bankruptcy court, but you people find it extremely difficult to represent cause bankruptcy has long-term financial and legal gly urged to hire a qualified attorney.
an attorr	e represented by ney, you do not file this page.	technical, and a mistake or inaction dismissed because you did not fill hearing, or cooperate with the confirm if your case is selected for au	ctly file and handle your bankruptcy case. The rules are very on may affect your rights. For example, your case may be e a required document, pay a fee on time, attend a meeting or urt, case trustee, U.S. trustee, bankruptcy administrator, or audit idit. If that happens, you could lose your right to file another is, including the benefit of the automatic stay.
		court. Even if you plan to pay a pa in your schedules. If you do not lis property or properly claim it as ex also deny you a discharge of all y case, such as destroying or hiding cases are randomly audited to de	d debts in the schedules that you are required to file with the articular debt outside of your bankruptcy, you must list that debt at a debt, the debt may not be discharged. If you do not list empt, you may not be able to keep the property. The judge can our debts if you do something dishonest in your bankruptcy property, falsifying records, or lying. Individual bankruptcy termine if debtors have been accurate, truthful, and complete. rime; you could be fined and imprisoned.
		hired an attorney. The court will no successful, you must be familiar w	orney, the court expects you to follow the rules as if you had not treat you differently because you are filing for yourself. To be with the United States Bankruptcy Code, the Federal Rules of cal rules of the court in which your case is filed. You must also on laws that apply.
		Are you aware that filing for bankr consequences?  No Yes	uptcy is a serious action with long-term financial and legal
			ud is a serious crime and that if your bankruptcy forms are ld be fined or imprisoned?
		☑ No ☐ Yes. Name of Person	one who is not an attorney to help you fill out your bankruptcy forms?  Preparer's Notice, Declaration, and Signature (Official Form 119).
		By signing here, I acknowledge that have read and understood this not	at I understand the risks involved in filing without an attorney. I ice, and I am aware that filing a bankruptcy case without an rights or property if I do not properly handle the case.  Signature of Debtor 2
		Date 6 2 7016 MM/DD /YYYY	Date MM / DD / YYYY

Contact phone

Email address

Cell phone

Cell phone

Contact phone (773) 977-6150

(773) 977-6150

Email address marcus.hughes@live.com

MM / DD / YYYY

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_			Document	Page 9 01 104
Fill in this	information to ide	entify your case and this	s filing:	
Debtor 1	MARCUS		HUGHES	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filin	(I) Firet Name	Middle Name		
	-		Last Name	
United State	s Bankruptcy Court fo	r the: Northern District of	lilinois	
Case numbe	r			
				☐ Check if this is an
				amended filing
Officia	l Form 106	A/B		
Sche	dule A/	B: Property	y	12/15
In each ca	tegory, separately	list and describe items	. List an asset only	once. If an asset fits in more than one category, list the asset in the

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

N/A     Street address, if available, or other description	What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building	Do not deduct secured clithe amount of any secure Creditors Who Have Claim	d claims on Schedule D.
	Condominium or cooperative  Manufactured or mobile home  Land Investment property	Current value of the entire property?	Current value of the portion you own?
City State ZIP Coo	Timeshare  Other	Describe the nature of interest (such as fee the entireties, or a life	simple, tenancy by
County	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this it property identification number:	Check if this is co	mmunity property
u own or have more than one, fist here:	What is the property? Check all that apply.  Single-family home	Do not deduct secured cla	ims or exemptions. Put I claims on Schedule D: Is Secured by Property.
Street address, if available, or other description	<ul> <li>Duplex or multi-unit building</li> </ul>	Creditors Who Flave Clair	is secured by Property.
Street address, if available, or other description		Current value of the entire property?	Current value of th portion you own?
Street address, if available, or other description  City State ZIP Code	Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	Current value of the	Current value of th portion you own?  \$

**MARCUS** Debtor 1 Case number (# known) First Name Middle Name What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put ☐ Single-family home 1.3 the amount of any secured claims on Schedule D. Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Condominium or cooperative Current value of the Current value of the entire property? portion you own? Manufactured or mobile home Land Investment property City State ZIP Code ☐ Timeshare Describe the nature of your ownership interest (such as fee simple, tenancy by Other\_ the entireties, or a life estate), if known. Who has an interest in the property? Check one Debtor 1 only County Debtor 2 only Debtor 1 and Debtor 2 only ☐ Check if this is community property At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No **∡** Yes TOYOTA Who has an interest in the property? Check one Make: Do not deduct secured claims or exemptions. Put CAMERY Debtor 1 only the amount of any secured claims on Schedule D. Model: Creditors Who Have Claims Secured by Property. Debtor 2 only 2016 Year: Debtor 1 and Debtor 2 only Current value of the Current value of the 16,660 Approximate mileage: entire property? At least one of the debtors and another portion you own? Other information: 24,000.00 0.00 Check if this is community property (see THIS IS A LEASED VEHICLE instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one 3.2. Make: Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: ☐ Check if this is community property (see instructions)

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Document Page 11 of 104 **MARCUS** Debtor 1 Case number (if known)\_ First Name Middle Name

	Model:	Who has an interest in the property? Check one.  Debtor 1 only	Do not deduct secured of the amount of any secure	ed claims on Schedule D
	Year:	Debtor 2 only	Creditors Who Have Cla	ims Secured by Property.
		Debtor 1 and Debtor 2 only	Current value of the	
	Approximate mileage:	At least one of the debtors and another	entire property?	portion you own?
	Other information:	Chook if this is assessed to	<b>e</b>	\$
		Check if this is community property (see instructions)	Ψ	<b>\$</b>
3.4.	Make:	Who has an interest in the property? Check one.	Do not deduct secured c	laims or exemptions. Put
	Model:	Debtor 1 only	the amount of any secure	ed claims on Schedule D: ims Secured by Property.
	Year:	Debtor 2 only	_	
	Approximate mileage:	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?
	Other information:	At least one of the debtors and another		parametry year out
		Check if this is community property (see instructions)	\$	\$
amp No	iles: Boats, trailers, motors, person	's and other recreational vehicles, other vehicles, and accessonal watercraft, fishing vessels, snowmobiles, motorcycle accesson	<b>sories</b> ries	
No Ye:	Make:  Model:	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on Schedule D: ns Secured by Property.
No Ye:	vies: Boats, trailers, motors, person s Make:	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only	Do not deduct secured cla	d claims on Schedule D
Xamp No Ye:	Make:  Model:	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cla the amount of any secure Creditors Who Have Clain	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?
No l Yes	Make:  Model:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)	Do not deduct secured class the amount of any secure Creditors Who Have Claim Current value of the entire property?	d claims on Schedule D: ns Secured by Property.  Current value of the
No You o	Make:  Model:  Cear:  Other information:	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)	Do not deduct secured distinct amount of any secure Creditors Who Have Claim  Current value of the entire property?	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$
No N	Make:  Model: Cear:  Other information:  with or have more than one, list here	Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured clathe amount of any securer Creditors Who Have Claim  Current value of the entire property?  \$	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$
No N	Make:  Model:  Other information:  who or have more than one, list here lake:	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured class the amount of any secure. Creditors Who Have Claim.  Current value of the entire property?  \$ Do not deduct secured class the amount of any secure. Creditors Who Have Claim.	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$
No Yes	Make:  Model:  Cear:  Other information:  who or have more than one, list here  lake:	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured clathe amount of any secure. Creditors Who Have Claim  Current value of the entire property?  \$ Do not deduct secured clathe amount of any secured Creditors Who Have Claim  Current value of the	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$
No N	Make:  Model:  Cear:  Other information:  who or have more than one, list here lake:  lodel:  ear:	who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured class the amount of any secure. Creditors Who Have Claim.  Current value of the entire property?  \$ Do not deduct secured class the amount of any secure. Creditors Who Have Claim.	d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$

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Debtor 1

MARCUS First Name

Middle Name

Last Name

Case number (if known)\_\_

sonal and Household Items	ar	You	Describe	Part 3:
sonal and Household Items	ar	You	Describe	Part 3:

De	o you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
6.	Household goods and furnishings	e. e.epe.e.
	Examples: Major appliances, furniture, linens, china, kitchenware	
	☑ No	
	Yes. Describe	:
		· \$
7.	Electronics	•
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
	☑ No	
	Yes. Describe	\$
		<b>a</b>
8.	Collectibles of value	
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles  No	
	Yes. Describe	
		\$
9.	Equipment for sports and hobbies	, i
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
	☑ No	Western.
	Yes. Describe	e
		<b>3</b>
	Firearms	M W
	Examples: Pistols, rifles, shotguns, ammunition, and related equipment  No	
	Yes. Describe	\$
	N-4	<b>P</b>
	Clothes	
ĺ	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories  No	
1	☑ Yes. Describe CLOTHING	s 100.00
		<u> </u>
E	<b>lewelry</b> Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver	
	☑ No ☐ Yes. Describe	<b> \$</b>
13. N	Ion-farm animals	
E	Examples: Dogs, cats, birds, horses	
	Z No	
Ĺ	■ Yes. Describe	\$
14 <b>A</b>	ny other personal and household items you did not already list, including any health aids you did not list	Ψ
5	<b>7</b> No	
	Yes. Give specific	7
	information	\$
4 E A		
15. A.	dd the dollar value of all of your entries from Part 3, including any entries for pages you have attached	\$100.00
,,	or Part 3. Write that number here	100.00

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Debtor 1

**MARCUS** First Name

Middie Name

Case number (if known)\_

Do you own or have an	ny legal or equitable înterest in	any of the following?	Current value of the portion you own?  Do not deduct secured clain or exemptions.
16. <b>Cash</b> <i>Examples:</i> Money yo	u have in your wallet in your ho	me, in a safe deposit box, and on hand when you file your petiti	
☑ No	and any our named, my you, no	me, in a sale deposit box, and on hard when you lie your petiti	on
		Cash	
		Cash:	\$\$
17. <b>Deposits of money</b> Examples: Checking, and other  No	savings, or other financial acco similar institutions. If you have r	unts; certificates of deposit; shares in credit unions, brokerage in nultiple accounts with the same institution, list each.	nouses,
<b>2</b> Yes		Institution name:	
	17.1. Checking account:	BANK OF AMERICA	s 533.00
	17.2. Checking account:		
	17.3. Savings account:		
	17.4. Savings account:		-
	17.5. Certificates of deposit:		
	17.6. Other financial account:		*
	17.7. Other financial account:		-
	17.8. Other financial account:		
	17.9. Other financial account:		<u> </u>
			<u> </u>
Examples: Bond funds,  No		erage firms, money market accounts	
☐ Yes	Institution or issuer name:		
	***		<u> </u>
			<u> </u>
			\$
<ol> <li>Non-publicly traded st an LLC, partnership, a</li> </ol>	tock and interests in incorpor and joint venture	ated and unincorporated businesses, including an interest	in
🗹 No	Name of entity:	% of ownership	·
Yes. Give specific information about	-	0% %	_
them		0% %	\$
		0% 4	\$

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Debtor 1

MARCUS First Name

Middle Name

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Non-negotiable instrum	,	, , , , , , , , , , , , , , , , , , , ,	
✓ No ☐ Yes. Give specific information about	Issuer name:		
them			\$
			\$
			\$
Retirement or pension Examples: Interests in	n accounts IRA, ERISA, Keogh	, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
☑ No	_	ty, ty, and earling plans	
Yes. List each	<b>T</b>		
account separately.	. Type of account:	Institution name:	
	401(k) or similar pla	in:	\$
	Pension plan:		\$
	IRA:		\$
	Retirement account		
	Keogh:		\$
	Additional account:		\$
			\$
Security deposits and p	Additional account:		\$ \$
Your share of all unused Examples: Agreements of companies, or others  Mo	Additional account:  prepayments deposits you have with landlords, prep	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications	
Your share of all unused Examples: Agreements of companies, or others  No	Additional account:  prepayments deposits you have with landlords, prep	made so that you may continue service or use from a company	\$
Your share of all unused Examples: Agreements a companies, or others  No	Additional account:  prepayments I deposits you have with landlords, prep	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications	\$\$
Your share of all unused Examples: Agreements of companies, or others  A No	Additional account:  prepayments deposits you have with landlords, prep	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications nstitution name or individual:	\$\$ \$\$
Your share of all unused Examples: Agreements of companies, or others  A No	Additional account:  prepayments d deposits you have with landlords, prep	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications nstitution name or individual:	\$
Your share of all unused Examples: Agreements of companies, or others  No	Additional account:  prepayments d deposits you have with landlords, prep	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications nstitution name or individual:	\$\$ \$\$
Your share of all unused Examples: Agreements a companies, or others  No	Additional account:  prepayments I deposits you have with landlords, prep  Electric:  Gas: Heating oil: Security deposit on re	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, wafer), telecommunications institution name or individual:	\$\$ \$\$ \$\$
Your share of all unused Examples: Agreements of companies, or others  A No	Additional account:  prepayments deposits you have with landlords, prep  Electric:  Gas: Heating oil: Security deposit on re	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications nstitution name or individual:	\$\$ \$\$ \$\$
Your share of all unused Examples: Agreements a companies, or others  No	Additional account:  prepayments I deposits you have with landlords, prepayments  Electric:  Gas: Heating oil: Security deposit on repaid rent: Telephone:	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, wafer), telecommunications institution name or individual:	\$\$ \$\$ \$\$
Your share of all unused Examples: Agreements of companies, or others  No  Yes	Additional account:  prepayments deposits you have with landlords, prep  Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water:	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, wafer), telecommunications institution name or individual:	\$\$ \$\$ \$\$ \$\$
Your share of all unused Examples: Agreements of companies, or others  No  Yes	Additional account:  prepayments I deposits you have with landlords, prep  Electric:  Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water: Rented furniture:	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, wafer), telecommunications institution name or individual:	\$\$ \$\$ \$\$ \$\$
Your share of all unused Examples: Agreements of companies, or others  No Yes	Additional account:  prepayments I deposits you have with landlords, prep  Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water: Rented furniture: Other:	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, wafer), telecommunications institution name or individual:	\$\$ \$\$ \$\$ \$\$
Your share of all unused Examples: Agreements of companies, or others  No Yes  Annuities (A contract for all the c	Additional account:  prepayments I deposits you have with landlords, prep  Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water: Rented furniture: Other:	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, wafer), telecommunications institution name or individual:	\$\$ \$\$ \$\$ \$\$
Annuities (A contract for a No	Additional account:  prepayments I deposits you have with landlords, prep  Electric: Gas: Heating oil: Security deposit on re Prepaid rent: Telephone: Water: Rented furniture: Other:	made so that you may continue service or use from a company aid rent, public utilities (electric, gas, water), telecommunications institution name or individual:  ental unit:  of money to you, either for life or for a number of years)	\$\$ \$\$ \$\$ \$\$

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Debtor 1

**MARCUS** 

First Name

Middle Name

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<b>Z</b> No		
Yes	Institution name and description. Separately file the records of any interests.11 U.S.C	. § 521(c):
		<b>G</b> == -(.)
		<u> </u>
		Ψ
		<u> </u>
5. Trusts, equitable or futu exercisable for your ber	re interests in property (other than anything listed in line 1), and rights or powers	
🗷 No		
Yes. Give specific		2444 an man on man on <sub>4</sub>
information about ther	n '	\$
6. Patents, convrights, trac	demarks, trade secrets, and other intellectual property	
Examples: Internet domai	n names, websites, proceeds from royalties and licensing agreements	
No		
Yes. Give specific		
information about then		\$
7	•	
Examples: Building permit	d other general intangibles s, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses	
✓ No	of explanation floorises, cooperative association floidings, liquor licenses, professional licenses	3
Yes. Give specific		
information about then		s
	<b>1</b>	\$
information about them		Current value of t
information about them		Current value of t
information about them oney or property owed to your. Tax refunds owed to you		Current value of t portion you own? Do not deduct secure
information about them loney or property owed to g  B. Tax refunds owed to you  No	you?	Current value of t portion you own? Do not deduct secure
information about them  oney or property owed to go  Tax refunds owed to you  No  Yes. Give specific infor	you? mation	Current value of t portion you own? Do not deduct secure
information about them  loney or property owed to go  Tax refunds owed to you  No Yes. Give specific infor about them, include	mation ling whether the returns	Current value of t portion you own? Do not deduct secure
information about them  oney or property owed to go  Tax refunds owed to you  No  Yes. Give specific infor	mation ting whether he returns  Federal: State:	Current value of t portion you own? Do not deduct secure
information about them loney or property owed to you  Tax refunds owed to you  No  Yes. Give specific infor about them, includy you already filed to	mation ling whether Federal: the returns	Current value of t portion you own? Do not deduct secure
information about them  loney or property owed to you  Tax refunds owed to you  No  Yes. Give specific infor about them, includyou already filed the and the tax years.	mation ling whether he returns  State: Local:	Current value of t portion you own? Do not deduct secure
information about them  loney or property owed to you  Tax refunds owed to you  No  Yes. Give specific infor about them, includy you already filed the and the tax years.  Family support	mation ting whether he returns  State: Local:	Current value of t portion you own? Do not deduct secure claims or exemptions.
information about them  loney or property owed to you  Tax refunds owed to you  No  Yes. Give specific infor about them, includy you already filed the and the tax years.  Family support	mation ding whether he returns State: Local:  p sum alimony, spousal support, child support, maintenance, divorce settlement, property se	Current value of t portion you own? Do not deduct secure claims or exemptions.
information about them  loney or property owed to you  Tax refunds owed to you  No  Yes. Give specific infor about them, includy you already filed the and the tax years.  Family support  Examples: Past due or lum	mation  fing whether he returns  State: Local:  p sum alimony, spousal support, child support, maintenance, divorce settlement, property se	Current value of t portion you own? Do not deduct secure claims or exemptions.
information about them  loney or property owed to you  Tax refunds owed to you  No  Yes. Give specific infor about them, includy you already filled the and the tax years.  Family support  Examples: Past due or lum	mation  fing whether he returns  State: Local:  p sum alimony, spousal support, child support, maintenance, divorce settlement, property se	Current value of t portion you own? Do not deduct secure claims or exemptions.
information about them  loney or property owed to you  Tax refunds owed to you  No  Yes. Give specific infor about them, includy you already filled the and the tax years.  Family support  Examples: Past due or lum	mation ding whether he returns  State: Local:  p sum alimony, spousal support, child support, maintenance, divorce settlement, property se	Current value of t portion you own? Do not deduct secure claims or exemptions.  \$
information about them  loney or property owed to you  Tax refunds owed to you  No  Yes. Give specific infor about them, includy you already filled the and the tax years.  Family support  Examples: Past due or lum	mation ding whether he returns State: Local:  p sum alimony, spousal support, child support, maintenance, divorce settlement, property semation.  Alimony:	Current value of t portion you own? Do not deduct secure claims or exemptions.
information about them  loney or property owed to you  Tax refunds owed to you  No  Yes. Give specific infor about them, includy you already filled the and the tax years.  Family support  Examples: Past due or lum	mation ding whether he returns State: Local:  p sum alimony, spousal support, child support, maintenance, divorce settlement, property se mation	Current value of t portion you own? Do not deduct secure claims or exemptions.  \$ \$ \$ settlement  \$ \$ \$ \$
information about them  loney or property owed to you  Tax refunds owed to you  No  Yes. Give specific infor about them, includy you already filled the and the tax years.  Family support  Examples: Past due or lum	mation ding whether he returns State: Local:  p sum alimony, spousal support, child support, maintenance, divorce settlement, property se mation.  Alimony: Maintenance: Support:	Current value of t portion you own? Do not deduct secure claims or exemptions.  \$ \$ \$ \$ stillement  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
information about them  loney or property owed to you  Tax refunds owed to you  No  Yes. Give specific infor about them, includy you already filed the and the tax years.  Family support  Examples: Past due or lum  No  Yes. Give specific inform  Other amounts someone of	mation  frederal:  frederal:  State:  Local:  p sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement.  Alimony:  Maintenance:  Support:  Divorce settlement  Property settlement	Current value of t portion you own? Do not deduct secure claims or exemptions.  \$ \$ \$ \$ stillement  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
information about them  loney or property owed to you  Tax refunds owed to you  No  Yes. Give specific infor about them, include you already filed the and the tax years.  Family support  Examples: Past due or lum  No  Yes. Give specific inform  Cher amounts someone of Examples: Unpaid wages, of	mation  fing whether he returns  State: Local:  Local:  p sum alimony, spousal support, child support, maintenance, divorce settlement, property se mation	Current value of t portion you own? Do not deduct secure claims or exemptions.  \$ \$ \$ \$ stillement  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$
information about them  loney or property owed to you  Tax refunds owed to you  No  Yes. Give specific infor about them, include you already filed the and the tax years.  Family support  Examples: Past due or lum  No  Yes. Give specific inform  Cher amounts someone of Examples: Unpaid wages, of	mation  frederal:  frederal:  State:  Local:  p sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement.  Alimony:  Maintenance:  Support:  Divorce settlement  Property settlement	Current value of t portion you own? Do not deduct secure claims or exemptions.  \$ \$ \$ \$ stillement  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$

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Debtor 1

MARCUS

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Case number (if known)\_\_\_ First Name Middle Name Last Name

31. Interests	in insurance policies			
		ce; health savings account (HSA); credit, homeow	vner's or renter's insurance	
Z No			mer e, or restler a magnatice	
Yes. 1	lame the insurance company	0		
(	f each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
				\$
				\$
				. \$
If you are	ecause someone has died.	spect proceeds from a life insurance policy, or are		
🔲 Yes. G	ive specific information			andre constraints
				: <b>s</b>
<b>.</b>				. *
Examples.	ainst third parties, whether or Accidents, employment disputes	not you have filed a lawsuit or made a demand , insurance claims, or rights to sue	I for payment	
No				
Yes. D	escribe each claim		and the second s	
				\$
34. Other con to set off	ingent and unliquidated claim claims	of every nature, including counterclaims of the	he debtor and rights	
No				
Yes. D	escribe each claim.			
		and the control of th		\$
35 Any financ	ial assets you did not already	1		
	· · · · · · · · · · · · · · · · · · ·			
No No			er (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	
Li Yes. G	ve specific information			•
		to the second of	The second of th	*
36. Add the do	ilar value of all of your entries	from Part 4, including any entries for pages yo	ou have attached	
for Part 4.	Write that number here	, pageo ye	→ nave attached	s 533.00
			_	· · · · · · · · · · · · · · · · · · ·
Part 5: D	nantha A Maritana n			
Lance. D	escribe Any Business-R	elated Property You Own or Have ar	ı Interest In. List any r	eal estate in Part 1.
37. <b>Do you ow</b> :	or have any legal or equitable	interest in any business-related property?		
🛭 No. Go		increase in any obstitess-related property?		
Yes. Go				
	to line oo.			
				Current value of the
				portion you own?
				Do not deduct secured claims or exemptions.
38. Accounts re	eceivable or commissions you	already earned		sometimenos
□ No				
Yes. De	coriba			:
- 163. De				œ
00 <b>Office</b>			e er	<b>3</b>
examples: Ru	oment, furnishings, and suppli	S minima minima na ing ta		
□ No	sinces-related computers, software, n	odems, printers, copiers, fax machines, rugs, telephones	s, desks, chairs, electronic devices	
Yes. Des	and a			
res. Des	CHDE			\$
	the second control of the second	Control of the Contro		*

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D	e٢	nto	r	1

**MARCUS** First Name Middle Name

40. Machinery, fixtures	equipment, supplies you use in business, and tools of your trade		
☐ No			
Yes. Describe			
	Control of the Contro		Ψ
41. Inventory			
Yes. Describe			
			\$
42. Interests in partnersh	ips or joint ventures		
☐ No			
Yes. Describe	Name of entity:		
	•	of ownership:	
	_	%	\$
		%	\$
		<u>%</u>	\$
43 Customer liete mailin	g lists, or other compilations		
No No	у наса, от оние сотриаціоня		
	include nerconally identificable to a		
□ No	include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?		
	ribe		
Yes. Desc	ribe	***************************************	i
			\$
44 Any husiness related	property you did not already list		
No No	property you did not already list		
Yes. Give specific			
information			¢
			\$
			\$
			\$
			\$
			Ψ
		***	\$
			\$
5. Add the dollar value of	f all of your entries from Part 5, including any entries for pages you have attach		
for Part 5. Write that n	umber here	ed	\$
		······· 7	
art 6: Describe An	Enum and A		
If you own or	y Farm- and Commercial Fishing-Related Property You Own or Have a nave an interest in farmland, list it in Part 1.	ın interest i	1.
,	The state of the s		
Do vou own or have an	y logal or omitable interest	· · · · · · · · · · · · · · · · · · ·	
No. Go to Part 7.	y legal or equitable interest in any farm- or commercial fishing-related property	?	
Yes. Go to line 47.			
- 103. OU to line 47,			
			Current value of the
			portion you own?
			Do not deduct secured claims
Farm animals			or exemptions.
Examples: Livestock, por	ultry, farm-raised fish		
□ No			
☐ Yes		trans reco-	
			* }
			e.
	the first of the first of the control of the contro		\$

Case 16-20325 Doc 1 Filed 06/22/16 Entered 06/22/16 11:01:50 Document Page 18 of 104 MARCUS Debtor 1 First Name 48 Crops—either growing or harvested ☐ No ☐ Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade ☐ No ☐ Yes..... 50. Farm and fishing supplies, chemicals, and feed ☐ No ☐ Yes 51. Any farm- and commercial fishing-related property you did not already list ☐ No Yes. Give specific information..... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership **☑** No ☐ Yes. Give specific information..... 54. Add the dollar value of all of your entries from Part 7. Write that number here Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 0.00 0.00 56. Part 2: Total vehicles, line 5 100.00 57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36 533.00 59. Part 5: Total business-related property, line 45 0.00 60 Part 6: Total farm- and fishing-related property, line 52 0.00 61. Part 7: Total other property not listed, line 54 0.00 62. Total personal property. Add lines 56 through 61. 633.00 Copy personal property total -> 633.00

63. Total of all property on Schedule A/B. Add line 55 + line 62.

633.00

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E:	ARCUS st Name Middle	HUGHE	<u>S</u>	
Debtor 2	st Name Middle	Name Last Name		
Spouse, if filing) Fir	st Name Middle	Name Last Name		
Jnited States Bar	kruptcy Court for the: Northern	District of Illinois		
Case number (If known)	100			☐ Check if this is
				amended filing
fficial Fo	rm 106C			
chedu	le C: The Pr	roperty You	Claim as Exemp	t 12/15
			ogether, both are equally responsible for	
ing the property	you listed on <i>Scheaule A/B</i> ,	<i>: Property</i> (Official Form 106	SA/B) as your source. list the property that	t you claim as evenint if more
ur name and ca	illi out and attach to this page se number (if known).	e as many copies of Part 2: .	Additional Page as necessary. On the top	of any additional pages, write
r each item of	property you claim as exer	mpt, you must specify the	amount of the exemption you claim. O	Ing way of doing so is to state a
scilic dollar all	iount as exempt. Aiternativ	vely, you may claim the ful	Il fair market value of the property heir	an exempted up to the amount
any applicable	statutory limit. Some exen	nptions—such as those fo	or health aids, rights to receive certain or claim an exemption of 100% of fair m	henefits, and tax-exempt
its the exempt	ion to a particular dollar ar	mount and the value of the	e property is determined to exceed that	arket value under a law that
				, ,
uld be limited	to the applicable statutory	amount.		
ara be imined	to the applicable statutory	amount.		
ara be imined	to the applicable statutory	amount.		
art 1: Iden Which set of	tify the Property You C exemptions are you claimi	amount.  laim as Exempt  ing? Check one only, even i	if your spouse is filing with you.	
art 1: Iden  Which set of  You are c	tify the Property You C exemptions are you claimi	laim as Exempt ing? Check one only, even in		
Which set of	tify the Property You C exemptions are you claimi	laim as Exempt ing? Check one only, even in		
Which set of  You are c	tify the Property You C exemptions are you claimi laiming state and federal nor laiming federal exemptions.	amount.  laim as Exempt  ing? Check one only, even in  nbankruptcy exemptions. 11  11 U.S.C. § 522(b)(2)	U.S.C. § 522(b)(3)	
Which set of  You are c	tify the Property You C exemptions are you claimi laiming state and federal nor laiming federal exemptions.	amount.  laim as Exempt  ing? Check one only, even in  nbankruptcy exemptions. 11  11 U.S.C. § 522(b)(2)		
Which set of You are c You are c For any prope	tify the Property You C exemptions are you claimi laiming state and federal nor laiming federal exemptions.	amount.  Iaim as Exempt  ing? Check one only, even in the one only in the one on the one of the one o	U.S.C. § 522(b)(3)	Specific laws that allow exemption
which set of You are c You are c For any proper	tify the Property You C exemptions are you claimi laiming state and federal nor laiming federal exemptions. erty you list on Schedule A	laim as Exempt  ing? Check one only, even in the order of	U.S.C. § 522(b)(3)  apt, fill in the information below.  Amount of the exemption you claim	Specific laws that allow exemption
which set of You are c You are c For any proper	tify the Property You C exemptions are you claimi laiming state and federal nor laiming federal exemptions. erty you list on Schedule A	amount.  laim as Exempt  ing? Check one only, even in the analysis of the analysis of the portion of the portion you own	U.S.C. § 522(b)(3)	Specific laws that allow exemption
which set of You are c You are c For any proper Schedule Alt	tify the Property You C exemptions are you claimi laiming state and federal nor laiming federal exemptions. erty you list on Schedule A	amount.  laim as Exempt  ing? Check one only, even in the analysis of the analysis of the portion of the portion you own  Copy the value from Schedule A/B	U.S.C. § 522(b)(3)  apt, fill in the information below.  Amount of the exemption you claim  Check only one box for each exemption.	·
Which set of You are c You are c For any proper	tify the Property You C exemptions are you claimi laiming state and federal nor laiming federal exemptions. erty you list on Schedule A stion of the property and line 3 that lists this property	amount.  Iaim as Exempt  ing? Check one only, even in the only in the one on the only in the one on the one on the one one one one one one one one one on	U.S.C. § 522(b)(3)  apt, fill in the information below.  Amount of the exemption you claim	Specific laws that allow exemption 11 U.S.C. § 522(b)(2)
which set of You are c You are c For any prope Brief description:	tify the Property You C exemptions are you claimi laiming state and federal nor laiming federal exemptions. erty you list on Schedule A stion of the property and line 3 that lists this property	amount.  laim as Exempt  ing? Check one only, even in the analysis of the analysis of the portion of the portion you own  Copy the value from Schedule A/B	u.s.c. § 522(b)(3)  upt, fill in the information below.  Amount of the exemption you claim  Check only one box for each exemption.	·
which set of You are c You are c For any proper Brief description: Line from Schedule A/B Brief	tify the Property You C exemptions are you claimi laiming state and federal nor laiming federal exemptions. erty you list on Schedule A stion of the property and line 3 that lists this property  CLOTHING	amount.  laim as Exempt  ing? Check one only, even in the price of the portion of	u.S.C. § 522(b)(3)  apt, fill in the information below.  Amount of the exemption you claim  Check only one box for each exemption.  2 \$ 100.00  100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(b)(2)
Which set of You are c You are c For any prope Brief description: Line from Schedule A/B Brief description:	tify the Property You C exemptions are you claimi laiming state and federal nor laiming federal exemptions. erty you list on Schedule A stion of the property and line 3 that lists this property  CLOTHING  11  BANKING	amount.  laim as Exempt  ing? Check one only, even in the analysis of the analysis of the portion of the portion you own  Copy the value from Schedule A/B	u.S.C. § 522(b)(3)  spt, fill in the information below.  Amount of the exemption you claim  Check only one box for each exemption.  100% of fair market value, up to any applicable statutory limit  800.00	·
which set of You are c You are c For any proper Brief description: Line from Schedule A/B Brief	tify the Property You C exemptions are you claimi laiming state and federal nor laiming federal exemptions. erty you list on Schedule A stion of the property and line 3 that lists this property  CLOTHING  11  BANKING	amount.  laim as Exempt  ing? Check one only, even in the price of the portion of	u.S.C. § 522(b)(3)  apt, fill in the information below.  Amount of the exemption you claim  Check only one box for each exemption.  2 \$ 100.00  100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(b)(2)
which set of You are c You are c You are c For any prope Brief description: Line from Schedule A/B Brief description: Line from Schedule A/B Brief Schedule A/B Brief	tify the Property You C exemptions are you claimi laiming state and federal nor laiming federal exemptions. erty you list on Schedule A stion of the property and line 3 that lists this property  CLOTHING  11  BANKING	laim as Exempt  ing? Check one only, even in a phankruptcy exemptions. 11 11 U.S.C. § 522(b)(2)  WB that you claim as exemption on Current value of the portion you own  Copy the value from Schedule A/B  \$ 100.00	u.S.C. § 522(b)(3)  apt, fill in the information below.  Amount of the exemption you claim  Check only one box for each exemption.  ✓ \$ 100.00  ☐ 100% of fair market value, up to any applicable statutory limit  ✓ \$ 800.00  ☐ 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(b)(2)
which set of You are c You are c You are c For any prope Brief description: Line from Schedule A/B Brief description: Line from Schedule A/B. Brief description: Line from Schedule A/B. Brief description:	tify the Property You C exemptions are you claimi laiming state and federal nor laiming federal exemptions. erty you list on Schedule A stion of the property and line 3 that lists this property  CLOTHING  11  BANKING	amount.  laim as Exempt  ing? Check one only, even in the price of the portion of	upt, fill in the information below.  Amount of the exemption you claim  Check only one box for each exemption.  \$\infty\$ \text{100.00} \\ \$\frac{100\%}{3}\$ of fair market value, up to any applicable statutory limit  \$\infty\$ \text{800.00} \\ \$\frac{100\%}{3}\$ of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(b)(2)
which set of You are c You are c You are c For any prope Brief description: Line from Schedule A/B Brief description: Line from Schedule A/B. Brief	tify the Property You C exemptions are you claimi laiming state and federal nor laiming federal exemptions. erty you list on Schedule A stion of the property and line 3 that lists this property  CLOTHING  11  BANKING  17.1	laim as Exempt  ing? Check one only, even in a phankruptcy exemptions. 11 11 U.S.C. § 522(b)(2)  WB that you claim as exemption on Current value of the portion you own  Copy the value from Schedule A/B  \$ 100.00	u.S.C. § 522(b)(3)  apt, fill in the information below.  Amount of the exemption you claim  Check only one box for each exemption.  ✓ \$ 100.00  ☐ 100% of fair market value, up to any applicable statutory limit  ✓ \$ 800.00  ☐ 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(b)(2)

☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

☐ No

Yes

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Debtor 1

MARCUS

First Name Middle Name

Last Name

HUGHES

Case number (if known)\_

#### Part 2:

### **Additional Page**

Brief descrip on Schedule	tion of the property and line A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description: Line from Schedule A/B:	-	\$	□ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$     100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	□ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ \$00% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	□ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	□ \$ to any applicable statutory limit	
Brief description: Line from Schedule A/B:	NATIONAL CONTRACTOR OF THE PROPERTY OF THE PRO	\$	□ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	\$ \$ any applicable statutory limit	
Brief description: Line from Schedule A/B:	700,00	\$	\$ \$ 100% of fair market value, up to any applicable statutory limit	
Brief description: Line from Schedule A/B:		\$	□ \$ 100% of fair market value, up to any applicable statutory limit	

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Fill in this	information to identify your o	case:			
Debtor 1	MARCUS	HUGHES			
Deptor		dle Name Last Name			
Debtor 2 (Spouse, if filing	2) First Name				
		dle Name Last Name			
United States	Bankruptcy Court for the: Northe	ern District of Illinois			
Case number					
(a kilowij)					k if this is an
				amen	ded filing
Official	Form 106D				
Schoo	Iulo Di Crodita	no Wile a Ularra Ol 1			
OCHEC	aute Di Credito	rs Who Have Claims Secur	ed by Pro	perty	12/15
Be as comp	lete and accurate as possible	e. If two married people are filing together, both are e	qually responsible	for supplying corre	rt
	. If more space is needed, co pages, write your name and c		and attach it to th	is form. On the top of	of any
		·			
1. Do any ci	reditors have claims secured	by your property?			
₩ No. C	heck this box and submit this fo	orm to the court with your other schedules. You have noth	ing else to report or	n this form.	
✓ Yes. F	ill in all of the information below	W.	,		
Dowl 4					
Part 1:	st All Secured Claims				
2. List all se	cured claims, if a creditor has	more than one secured claim, list the creditor separately	Column A	Column B	Column C
TOT CACELLE	airii. Ii iiiore than one creditor	has a particular claim, list the other creditors in Part 2	Amount of claim	Value of collateral	Unsecured
As much a	is possible, list the claims in all	phabetical order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	<b>portion</b> If any
2.1		Departies the second second			ii any
Creditor's Na	me	Describe the property that secures the claim:	\$	<u> </u>	\$
Number	Street				
		As of the date you file, the claim is: Check all that apply	<b>∹</b> '		
		Contingent			
City	State ZIP Code	Unliquidated Disputed			
Who owes t	he debt? Check one.	·			
Debtor 1		Nature of lien. Check all that apply.			
Debtor 2	*	<ul> <li>An agreement you made (such as mortgage or secured car loan)</li> </ul>			
	and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least o	ne of the debtors and another	Judgment lien from a lawsuit			
Check if	this claim relates to a	Other (including a right to offset)			
commun					
Date debt wa	s incurred	Last 4 digits of account number			
2.2		Describe the property that secures the claim:	S	ranovalombonalombonopa (porazi abenda o en enemengolomi inmes, o e	
Creditor's Nan	ne		<u> </u>		\$
Number	Street	- 1 - 1			
Manbel	3866(	A- JAh - Jah			
		As of the date you file, the claim is: Check all that apply.    Ontingent			
		Unliquidated			
City	State ZIP Code	☐ Disputed			
Who owes th	e debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 o	•	An agreement you made (such as mortgage or secured)			
Debtor 2 o		car loan)			
	nd Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
	e of the debtors and another	Judgment lien from a lawsuit			
	his claim relates to a	Other (including a right to offset)			
communition Date debt was		A model and the least of the le			
emark toward them with the device of with the water of	of english and enterest enteresting the development enteresting and the supplication of the en-	Last 4 digits of account number	and a great water and programment and a country of the country of		wilesson who have been a second and the second and
Aug the do	mar value of your entries in (	Column A on this page. Write that number here:			· · · · · · · · · · · · · · · · · · ·

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Debtor 1

		<b>D</b> o o a i i i o i i c	. ago == 0. =0 .	
MARCUS		HUGHES	Cana ausai	
First Name	Middle Name	Last Name	Case num	DEF (if known)

Additional Page Part 1: After listing any entries on this by 2.4, and so forth.	s page, number them beginning with 2.3, followed	Column A  Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	Describe the property that secures the claim:	\$	\$	\$
Creditor's Name		1		<u> </u>
Number Street				
	A - A M			
	<ul> <li>As of the date you file, the claim is: Check all that apply.</li> <li>Contingent</li> </ul>			
City State ZIP Code	Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only	car loan)			
<ul><li>□ Debtor 1 and Debtor 2 only</li><li>□ At least one of the debtors and another</li></ul>	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
	Other (including a right to offset)			
Check if this claim relates to a community debt		-		
Date debt was incurred	Last 4 digits of account number			
And the state of t	Proposition at the second seco		kkit mare hi ershire e që e përqueta e Wigorita dhe kvemmen di er kjemigar tajtë 2000 i mje sëtishte në e e ase	met et estatetikk nikolasiik ek kilonoonia kilonoosii ee kulonoosii e
Creditor's Name	Describe the property that secures the claim:	\$	\$\$	
Number Street	•			
Number Street				
	As of the date you file, the claim is: Check all that apply.  Ontingent			
	Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secured			
Debtor 1 and Debtor 2 only	car loan)			
At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt	- /			
Date debt was incurred	Last 4 digits of account number			
The second secon	Describe the property that secures the claim:	and a market and a state of the		September of the state of the second property
Creditor's Name	property that devoted the claim.	P	\$\$	
Number Street				
	As of the date you file, the claim is: Check all that apply.			
City State ZIP Code	Contingent			
City State ZIP Code	☐ Unliquidated☐ Disputed☐			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured)			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit			
	☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)			
☐ Check if this claim relates to a community debt	Color (moldering a right to onset)			
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entries	in Column A on this page. Write that number here:			
	add the dollar value totals from all pages.			
Write that number here:	\$			

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Debtor 1

**MARCUS** 

**HUGHES** 

		First Name Middle Name	Last Name		Case number (if known)
	Part 2:	List Others to Be N	otified for a Del	ot That You Airea	dy Listed
3	you have m	ge only if you have others	s to be notified abo for a debt you owe	out your bankruptcy for to someone else, list	or a debt that you already listed in Part 1. For example, if a collection the creditor in Part 1, and then list the collection agency here. Similarly, if , list the additional creditors here. If you do not have additional persons to
					On which line in Part 1 did you arrest to you to
	Name			A-27	On which line in Part 1 did you enter the creditor?
	<del></del>				Last 4 digits of account number
	Number	Street			Manager Control of the Control of th
	City	ARABA WANTE AND	State	7/0.0-1	
Γ-	7	territoria de la compansión de la compan	State	ZIP Code	
<u></u>	Name				On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			<b></b>
	City		State	ZIP Code	<b></b>
					On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			-
			****		_
	City	700 - 111114 ATAMA 141144 - 111111	State	ZIP Code	_
		er terresi		<b></b>	
	Name				On which line in Part 1 did you enter the creditor?
					Last 4 digits of account number
	Number	Street	, , , , , , , , , , , , , , , , , , ,		-
	City		State	ZIP Code	
					•
	Name				On which line in Part 1 did you enter the creditor?
					Last 4 digits of account number
	Number	Street			
	City				
7	,		State	ZIP Code	
_	Nome				On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
i	Number	Street			

City

ZIP Code

State

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Fill in this	information to ident	ify your case:			
Debtor 1	MARCUS		HUGHES		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse, if filir	1g) First Name	Middle Name	Last Name		
United State	s Bankruptcy Court for th	ne: Northern District of	Illinois		
Case numbe (If known)	er		**************************************		
<u></u>					Check if this is ar amended filing
Officia	al Form 1060	Dec			
****		<del></del>	Individual	Debtor's Schedules	12/15
If two mai	rried people are filin	g together, both are e	equally responsible for s	supplying correct information.	
<b>∡</b> No		y someone who is NC	OT an attorney to help y	ou fill out bankruptcy forms?	
<b>∟</b> Yes	S. Name of person			Attach Bankruptcy Petition Preparer's Notice, Declarati Signature (Official Form 119).	on, and
<b>≭</b> ∭ Signatu	MUS of the second of the secon	<u> </u>	ad the summary and scl	nedules filed with this declaration and	
Date	e 21 7016		Date		

Case 16-20325 Doc 1 Filed 06/22/16 Entered 06/22/16 11:01:50 Desc Main Page 25 of 104 Document Fill in this information to identify your case: **MARCUS HUGHES** Debtor 1 First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name United States Bankruptcy Court for the: Northern District of Illinois Check if this is an Case number (If known) amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: **List All of Your PRIORITY Unsecured Claims** 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim **Priority** Nonpriority amount amount VILLAGE OF STONE PARK Last 4 digits of account number K F 0 C \$\_\_\_200.00 \$\_\_200.00 \$ When was the debt incurred? 05/09/2016 PO BOX 7725 As of the date you file, the claim is: Check all that apply CAROL STREAM 60197 Contingent Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were Is the claim subject to offset? intoxicated No. Other, Specify Yes CITY OF EVANSTON Last 4 digits of account number 3 4 7 5 69.00 69.00 0.00 CITATION PROCESSING CENTER When was the debt incurred? 02/17/2016 PO BOX 3214 As of the date you file, the claim is: Check all that apply **MILWAUKEE** Contingent W 53201 Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only ■ Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were Check if this claim is for a community debt intoxicated Is the claim subject to offset?

V No ☐ Yes Other. Specify

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Debtor 1

er listing any entries on this page, number the	em beginning with 2.3, followed by 2.4, and so forth.	Total claim Priorit amour	
VILLAGE OF SKOKIE Priority Creditor's Name	Last 4 digits of account number N G 2 Q	s 200.00 s 200	0.00 \$ 0.00
Number Street	When was the debt incurred? 03/09/2015		
РО ВОХ	As of the date you file, the claim is: Check all that apply		
CAROL CIDEANA III			
CAROL STREAM IL 60197 City State ZIP Code	Contingent Unliquidated		
	Disputed		
Who incurred the debt? Check one.			
Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:		
Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations		
At least one of the debtors and another	Taxes and certain other debts you owe the government		
	<ul> <li>Claims for death or personal injury while you were intoxicated</li> </ul>		
☐ Check if this claim is for a community debt	Other. Specify		
Is the claim subject to offset?			
₩ No			
Yes			
$0.000 \pm 0.000 \pm 0.0000 \pm 0.0000 \pm 0.0000 \pm 0.0000 \pm 0.00000 \pm 0.000000 \pm 0.00000000$	$f_{i,j,j}(x) = f_{i,j,j}(x) = f_{i$	raund darfumster Sunning aus der eine gerigte Stein (Stein) und der Sunning an eine aus eine eine die gestelle	**************************************
CITY OF CHICAGO DEPT OF	Last 4 digits of account number 3 5 5 6	\$150.00	.00 s 0.00
Priority Creditor's Name REVENUE		· · · · · · · · · · · · · · · · · · ·	<u> </u>
Number Street	When was the debt incurred? 11/23/2015		
150 N MICHIGAN AVE #2035	As of the date you file, the claim is: Check all that apply.		
CHICAGO IL 60601	• • •		
CHICAGO         IL         60601           City         State         ZIP Code	☐ Contingent ☐ Unliquidated		
	Disputed		
Who incurred the debt? Check one.			
Debtor 1 only	Type of PRIORITY unsecured claim:		
Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations		
At least one of the debtors and another	Taxes and certain other debts you owe the government		
	Claims for death or personal injury while you were		
Check if this claim is for a community debt	intoxicated  Other. Specify		
Is the claim subject to offset?			
□ No			
☐ Yes			
U.I. INOIC DEDARTMENT OF	$+ \frac{1}{2} \left( \frac{1}{2}$	inder det siden vir seden udge egglingsen gegrenne gigt et som en en en en en en en egge generale en generale g	gan dangan sa ana ana a manangan gandgan ba at matabat ti tan maa a sa at a an tan at a sa at a sa at a sa at
ILLINOIS DEPARTMENT OF Priority Creditor's Name	Last 4 digits of account number 4 3 5 7	\$ <u>1,500.00</u> \$ <u>1,500.</u>	OC \$ 0.00
REVENUE	When was the debt incurred? 04/15/2016		
Number Street	when was the debt incurred? 04/13/2010		
	As of the date you file, the claim is: Check all that apply.		
SPRINGFIELD IL 62719	☐ Contingent		
City State ZIP Code	Unliquidated		
After income date of 140 or	☐ Disputed		
Who incurred the debt? Check one.	_		
Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Domestic support obligations		
At least one of the debtors and another	Taxes and certain other debts you owe the government		
	Claims for death or personal injury while you were intoxicated		
Check if this claim is for a community debt	Other. Specify	na ar anna a fa Laghnach a' llean Larrannach Larf na caoir La na ann ac La na ann an Lannach	artirets travers, record, and the travers are accounty and in age,

Yes

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Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

	No. You have nothing to report in the Yes	nis part.	Submit this form to	the court with your other schedules.			
4	List all of your nonpriority unsecured nonpriority unsecured claim, list the cre included in Part 1. If more than one creclaims fill out the Continuation Page of	ditor bold	in the alphabetic parately for each cl ds a particular claid	cal order of the creditor who holds laim. For each claim listed, identify w m, list the other creditors in Part 3.If y	each claim. If a creditor ha hat type of claim it is. Do na you have more than three n	as more t ot list clai conpriority	han one ms already r unsecured
4.1	ARNOLD SCOTT HARRIS, P.	C				Total	claim
	Nonpriority Creditor's Name	<u> </u>		Last 4 digits of account number	r <u>8 9 6 9</u>	•	1,084.00
	111 W JACKSON BLVD, SUIT	E 600		When was the debt incurred?	04/27/2015	Ψ	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	CHICAGO	IL	60604				
	City	State	ZIP Code	As of the date you file, the claim	is: Check all that apply.		
				Contingent	11.4		
	Who incurred the debt? Check one.			Unliquidated			
	Debtor 1 only			Disputed			
	Debtor 2 only Debtor 1 and Debtor 2 only						
	At least one of the debtors and another			Type of NONPRIORITY unsec	ured claim:		
				Student loans			
	Check if this claim is for a commun	ity debt		Obligations arising out of a sepa	ration agreement or divorce		
	Is the claim subject to offset?			that you did not report as priority  Debts to pension or profit-sharin	claims		
	Ø No			Other Specify MEDICAL	g plans, and other similar debts	8	
	Yes			-			
4.2	RCN	h Lordonner, et a Gellomb Lectures and	والماصلة والمواد المستناك في المحافظ المستناف أو المنطقة والمارية المنافظ المستنافظ المستنافظ المستناط المستناط المستناط المستنا	1200 distance and exceptional exceptions are proposed as a finite content of the content of th	en empera es sub-emplement es escesión en primeira especialment de primeira de emperatura per especialment de	Territori mangari pengengga kan	omannet in montatures generally state.
<b>!</b>	Nonpriority Creditor's Name			Last 4 digits of account number When was the debt incurred?	<u>1 1 0 4</u> 08/03/2014	\$	64.00
	100 BALTIMORE DRIVE			when was the debt incurred?	00/03/2014		
	Number Street			_			
	WILKES-BARRE	PA	18702	As of the date you file, the claim	is: Check all that apply.		
	City	State	ZIP Code	Contingent			
	Who incurred the debt? Check one.			Unliquidated			
	Debtor 1 only			☐ Disputed			
	Debtor 2 only						
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecu	red claim:		
	At least one of the debtors and another			☐ Student loans			
	☐ Check if this claim is for a communit	tv debt		Obligations arising out of a separa	ation agreement or divorce		
	Is the claim subject to offset?	y acut		that you did not report as priority of	claims		
	2 No			Debts to pension or profit-sharing Other. Specify UTILITY	plans, and other similar debts		
	Yes			- Onier. Specify OTILITI			
4.3	a titilli tarangan mengan balangan kang ang kang kang kananggan mangkan mengangan kang kang dibangkan penganga Pengangan mengan balanggan kang kang kang kang kang kang kan	and a market and a series of the series of t		en proportion de la company de	nakonari na kyantan ika asantan apipiyamana mahan ika kilomonari katilan 1 m. katilaha 1 d. man anan anagan k	a talimbah'a a tahahan basil ay kasasa	
L	DICKS SPORTING GOODS/AL Nonpriority Creditor's Name	LIEDII	NTERSTATE	Last 4 digits of account number	4 4 3 5		700.00
	7525 W CAMPUS ROAD				11/20/2014	\$	763.00
	Number Street						
	NEW ALBANY (	ЭН	43054				
	G:/	ate	ZIP Code	As of the date you file, the claim is	s: Check all that apply.		
	Who incurred the debt? Check one.			☐ Contingent			
	Debtor 1 only			Unliquidated			
	Debtor 2 only			Disputed			
	Debtor 1 and Debtor 2 only			***			
	At least one of the debtors and another			Type of NONPRIORITY unsecure	ed claim:		
	Check if this claim is for a community	dobt		Student loans			
		UCDL		Obligations arising out of a separat that you did not report as priority cl.	ion agreement or divorce		
	Is the claim subject to offset?  No			Debts to pension or profit-sharing p	aims		
	Yes			Other. Specify <u>CREDIT CAF</u>	RD		

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Debtor 1

**MARCUS** 

Middle Name

Last Name

Part 2:

Your NONPRIORITY Unsecured Claims - Continuation Page

After	listing any entries on this page, n	umber the	em beginning with 4	.4, followed by 4.5, and so forth.	Total claim
[4.4]	CAPITAL ONE/BLATT, HASE	ENMILLE	R, LEIBSKER	Last 4 digits of account number 4 0 5 9	\$_2,982.00
	10 S LASALLE STREET, SU	ITE #22(	00	When was the debt incurred? 12/30/2014	
	Number Street CHICAGO	IL	60626	As of the date you file, the claim is: Check all that apply.	
<b>v</b> [	Nho incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	State	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured claim: ☐ Student loans	
is S	At least one of the debtors and another Check if this claim is for a commus the claim subject to offset? No Yes			Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify CREDIT CARD	
N	PROFESSIONAL CHOICE RE	ECOVEF	RY, INC	Last 4 digits of account number 5 0 4 4	s_1,695.00
	O BOX 5234		***************************************	When was the debt incurred? 01/18/2016	
	INCOLN	NE	68505	As of the date you file, the claim is: Check all that apply.	
is	/ho incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a commute claim subject to offset?  No Yes		ZIP Code	<ul> <li>☐ Contingent</li> <li>☐ Unliquidated</li> <li>☐ Disputed</li> <li>Type of NONPRIORITY unsecured claim:</li> <li>☐ Student loans</li> <li>☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>☐ Debts to pension or profit-sharing plans, and other similar debts</li> <li>☑ Other, Specify LOAN</li> </ul>	
No	GREAT LAKES  Impriority Creditor's Name  O BOX 7860			Last 4 digits of account number 7 5 8 1  When was the debt incurred? 04/30/2016	<sub>\$</sub> _181,694.0
Nu	mber Street			As of the date you file, the claim is: Check all that apply.	
Cit <sub></sub>	MADISON y ho incurred the debt? Check one.  Debtor 1 only	WI State	53707 ZIP Code	Contingent Unliquidated Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a communithe claim subject to offset? No Yes	iity debt		Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify	

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Debtor 1

Part 3:

List Others to Be Notified About a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
On which process in Paris 4 C. P. 4

Name				On which entry in Part 1 or Part 2 did you list the original creditor?
Number	Street			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
			***************************************	Last 4 digits of account number
City		State	ZIP Code	
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
Number	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured
				Claims
City	and the second control of the second control	State	ZIP Code	Last 4 digits of account number
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
Number	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
				Part 2: Creditors with Nonpriority Unsecured Claims
City		State	ZIP Code	Last 4 digits of account number
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
City		State	ZIP Code	Last 4 digits of account number
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
Number	Street			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street			Claims Part 2: Creditors with Nonpriority Unsecured
City	er er klim senta milan klimper er krimper er en er er er er er en er klimper.	State  State	ZIP Code	Last 4 digits of account number
Nome				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Streef			Part 2: Creditors with Nonpriority Unsecured Claims
City		State	ZIP Code	Last 4 digits of account number
Name	<u> </u>			On which entry in Part 1 or Part 2 did you list the original creditor?
Vumber	Street			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
same!	Otteet			Part 2: Creditors with Nonpriority Unsecured Claims
City		State	ZIP Code	Last 4 digits of account number

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Debtor 1

**MARCUS** First Name

Middle Name

Last Name

Part 4:

### Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim	
Total claims	6a	Domestic support obligations	6a.	\$	0.00
from Part 1	6b	Taxes and certain other debts you owe the government	6b.	\$	8,119.00
	6c	. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d	. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	262,111.00
	6e	. <b>Total.</b> Add lines 6a through 6d.	6e.	\$	272,500.00
				Total claim	
Total claims	6f.	Student loans	6f.	\$	181,694.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ .	90,806.00
		with the disoust field.	OI.	. 4	

Case 16-20325 Doc 1 Filed 06/22/16 Entered 06/22/16 11:01:50 Desc Main Page 31 of 104 Document Fill in this information to identify your case: **MARCUS HUGHES** Debtor 1 First Name Last Name (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois ☑ Check if this is an (If known) amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Priority Nonpriority amount amount Last 4 digits of account number \_\_\_\_\_ Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply Contingent ☐ Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were Is the claim subject to offset? intoxicated Other, Specify Yes 2.2 Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply Contingent State Unliquidated ■ Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were Check if this claim is for a community debt intoxicated Is the claim subject to offset? Other, Specify ☐ No

☐ Yes

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Debtor 1

Middle Name

Case number (if known)\_

Part 1: Your PRIORITY Unsecured Claims — Continuation Page

	nem beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpri amoun
Priority Creditor's Name	Last 4 digits of account number	\$	. \$	\$
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	Unliquidated			
M/L a fin	Disputed			
Who incurred the debt? Check one.	- Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only				
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government			
Check if this claim is for a community debt	<ul> <li>Claims for death or personal injury while you were intoxicated</li> </ul>			
Is the claim subject to offset?	Other. Specify			
☐ No ☐ Yes				
La Yes    White the control of the c				
Priority Creditor's Name	Last 4 digits of account number			
		B \$	<u> </u>	\$
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
State 7/D Code	Contingent			
State ZIP Code	Unliquidated			
Vho incurred the debt? Check one.	☐ Disputed			
Debtor 1 only				
Debtor 2 only	Type of PRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government			
	Claims for death as necessary ou owe the government			
Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
	Other. Specify			
the claim subject to offset?				
No				
Yes				
only Creditor's Name	Last 4 digits of account number	المعاقبية أوجا المستويية فإراء والبياني أوارا البيانية من المعاونة في المعاونة المعاونة المعاونة والمعاونة وال	errore de de describer de la primer de la come de segueix des	e tita kalanda karamatan karamatan di karamatan karamatan karamatan karamatan karamatan karamatan karamatan ka
		\$	\$ <sub>.</sub>	····
niber Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
State ZIP Code	Contingent			
33 <b>4</b> 5	Unliquidated			
o incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY			
Debtor 2 only	Type of PRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government			
	Claims for death or personal injury while you was-			
the chain is for a community debt	intoxicated  Other. Specify	erritti kan meneran jarkan kengangan reproperties kilan mengang	ter (tarakat tarak li si seringan da Jandara da se ananga	Non-modern comment, stay com constructing of
e claim subject to offset?				
√o				
'es				

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Part 2:

Debtor 1

List All of Your NONPRIORITY Unsecured Claims

Last Name

3	Do any creditors have nonpriority unsecured claims agains	et you?	
	No. You have nothing to report in this part. Submit this form	to the court with your other schedules	
	Yes	to the sourt than your other scriedules.	
	Liet all of your name is at		
7	<ul> <li>List all of your nonpriority unsecured claims in the alphaber nonpriority unsecured claim, list the creditor separately for each</li> </ul>	tical order of the creditor who holds each claim. If a creditor ha	as more than one
	included in Part 1. If more than one creditor holds a particular of	claim . For each claim listed, identify what type of claim it is. Do no aim . For each claim listed, identify what type of claim it is. Do no aim . list the other craditors is Don't .	of list claims already
	claims fill out the Continuation Page of Part 2.	ciaim. For each claim listed, identify what type of claim it is. Do no aim, list the other creditors in Part 3.If you have more than three n	onpriority unsecured
	·		
	<b>-</b> 7		Total claim
4.1		1 4 4 11 11 4	, our ciain
	Nonpriority Creditor's Name	Last 4 digits of account number	er.
		When was the debt incurred?	<b>a</b>
	Number Street		
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.	Contingent	
	Debtor 1 only	Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Tune of NONDRIGHT	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		Student loans	
	Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce	
	Is the claim subject to offset?	that you did not report as priority claims	
	□ No	Debts to pension or profit-sharing plans, and other similar debts	<b>;</b>
	Yes	Other. Specify	
F			
4.2		Last 4 digits of account number	Sittan erilmen et dalar da kolomogra partinituria erilander da nur era da dada ni uma.
	Nonpriority Creditor's Name	When was the debt incurred?	Ψ
	Number Street	MARKATA AND AND AND AND AND AND AND AND AND AN	
		As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	☐ Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	Disputed	
	Debtor 2 only		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	□ No	Other, Specify	
	Yes		
4.3	-1 + (1 + (1 + (1 + (1 + (1 + (1 + (1 +	d and services processed processed and the services of the services and the services are services and the services and the services and the services are services and the services and the services and the services are services	والمنافذة والموارض والمعارض والمستحدد والمنافذة والمنافذة والمنافذة والمنافذة والمنافذة والمنافذة والمنافذة والمنافذة
	Nonpnority Creditor's Name	Last 4 digits of account number	
	Complicity Cleditor 5 Maille	When was the debt incurred?	<u> </u>
	Number Street		
	Gu dat		
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	State Zir Code		
	Who incurred the debt? Check one.	Contingent	
	Debtor 1 only	Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Time of NONDRIGHT	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans	
	•	Obligations arising out of a separation agreement or divorce	
	Is the claim subject to offset?	that you did not report as priority claims	
	□ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

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Debtor 1

Part 2:

**MARCUS** 

Middle Name

Last Name

Your NONPRIORITY Unsecured Claims - Continuation Page

ST FRANCIS HOSPITAL Nonpriority Creditor's Name		Last 4 digits of account number 7 1 1 5	\$_10,389.00
355 RIDGE AVE		When was the debt incurred? 04/27/2015	
Number Street EVANSTON	IL 60602	As of the date you file, the claim is: Check all that apply.	
	State ZIP Code	Contingent	
Who incurred the debt? Check one.		Unliquidated	
Debtor 1 only		Disputed	
Debtor 2 only		Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		Student loans	
At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a communi	ty debt	you did not report as priority claims	
s the claim subject to offset?		☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify MEDICAL	
☑ No ☑ Yes		Guerra Specify Williams 707 th	
t effectively for the section of the contract of the section of th	t Ordio Marsialian Turri Branzen urrana (1800) Alba (1800) Alba (1800) Alba (1800) Alba (1800) Alba (1800) Alba		والإنوار فيضع في الإنواز في الإنواز المعالي المناطقة والمناطقة المناطقة المناطقة المناطقة المناطقة المناطقة ا
Nonpriority Creditor's Name		Last 4 digits of account number	\$
- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		When was the debt incurred?	
lumber Street		As of the date you file, the claim is: Check all that apply.	
ity S	itate ZIP Code	Contingent	
Him San Control of the Control of th		☐ Unliquidated	
Who incurred the debt? Check one.		☐ Disputed	
Debtor 1 only Debtor 2 only		To a Chickenia and a chickenia	
Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another		Student loans	
Check if this claim is for a communit	v daht	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
s the claim subject to offset?	y debt	Debts to pension or profit-sharing plans, and other similar debts	
No		Other. Specify	
Yes			
	том желден жаралданда үлдөн байтарын байларын байларын жаралы орон кайрын кайралын айын кайрын кайрын айын айы	Last 4 digits of account number	\$
onpriority Creditor's Name		When was the debt incurred?	
umber Street	**************************************	As of the date you file, the claim is: Check all that apply.	
ty Si	ate ZIP Code	Contingent	
ho incurred the debt? Check one.		Unliquidated	
Debtor 1 only		Disputed	
Debtor 2 only		Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only		Student loans	
At least one of the debtors and another		<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>	
Check if this claim is for a community	debt debt	you did not report as priority claims	
the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts	
No		Other Specify	
Yes			

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Debtor 1

**MARCUS** 

Middle Name

Documents

Part 3:

Last Name

### List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name	On which entry in Part 1 or Part 2 did you list the original creditor?
walle	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claim
	Last 4 digits of account number
City State ZIP Code	
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Sadel	Part 2: Creditors with Nonpriority Unsecured Claims
City State ZIP Code	Last 4 digits of account number
104500000000000000000000000000000000000	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
City State ZIP Code	Last 4 digits of account number
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
	Claims
City State ZiP Code	Last 4 digits of account number
	On which entry in Part 1 or Part 2 did you list the original creditor?
Name	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
Vame	On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
	Part 2: Creditors with Nonpriority Unsecured Claims
Dity State ZIP Code	Last 4 digits of account number

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Debtor 1

**MARCUS** First Name

Middle Name

Part 4:

### Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0.00
	6e. <b>Total.</b> Add lines 6a through 6d.	6e.	\$	0.00
			Total claim	
Total claims	6f. Student loans	6f.	\$	0.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	<ol> <li>Other. Add all other nonpriority unsecured claims.</li> <li>Write that amount here.</li> </ol>	6i.	+ \$	0.00
	6j. <b>Total.</b> Add lines 6f through 6i.	6j.	\$	0.00

Fill in this	information to ident	ify your case:	Document 1	age 37 01 104			
Debtor 1	MARCUS		HUGHES				
Debtor 2	First Name	Middle Name	Last Name				
(Spouse, if filin	ng) First Name	Middle Name	Last Name				
United State	s Bankruptcy Court for th	ne: Northern Distric	t of Illinois				
Case numbe (If known)	er						ck if this is a ended filing
⊃ (C: - : - I	F 400E						
	Form 106E/	<del></del>					
scnea	ule E/F: C	reditors \	Who Have U	nsecured Clair	ns		12/15
needed, cop any addition Part 1: L	ui partially secured (	fill it out, number name and case n	ted in Schedule D: Cred the entries in the boxe umber (if known). red Claims	tracts and Unexpired Leases ditors Who Have Claims Secu es on the left. Attach the Cont	red by Propert	v If more ena	on ie
each clair nonpriorit unsecure	y amounts. As much a d claims, fill out the Co	type of claim it is. I' as possible, list the ontinuation Page of	r a claim has both priority claims in alphabetical or Part 1. If more than one	ne priority unsecured claim, list y and nonpriority amounts, list to der according to the creditor's re e creditor holds a particular claim in the instruction booklet.)	hat claim here a	nd show both	priority and
<b>–</b> 1				,	Total claim	Priority amount	Nonpriorit amount
╝			Last 4 digits of accou	ınt number	\$	\$	\$
Priority Cre	editor's Name		When was the debt in				
Number	Street		Wilen was the depth	icarrea;			
			As of the date you file	e, the claim is: Check all that appl	y		
City	Sta	ite ZIP Code	Contingent				
•	urred the debt? Check		Unliquidated				
Debto		one.	Disputed				
Debto			<b>-</b>				
	or 1 and Debtor 2 only		Type of PRIORITY u	nsecured claim:			
	st one of the debtors and	Longthor	Domestic support of				
			Taxes and certain of	ther debts you owe the government			
	k if this claim is for a	-	Claims for death or p	personal injury while you were			
	aim subject to offset?		intoxicated				
☐ No			Other, Specify	·	•		
Q Yes	mandamber (landare promotes desperíado) a landarecum pur accessor un esca es	en distribution de la company de la comp	and the control of th	de la colinita de locales que, con que que que que en como con como en constitue la lactica de desir la carrec			
Priority Cred	ditor's Name		Last 4 digits of accou	nt number	\$	_ \$	\$
			When was the debt in	curred?			
Number	Street		A				
-,				, the claim is: Check all that apply	1		
			Contingent				
City	Stat		Unliquidated				
	rred the debt? Check	one.	Disputed				
Debtor	*		Type of PRIORITY ur	reactived claims			
Debtor							
	1 and Debtor 2 only		Domestic support obl				
	t one of the debtors and			her debts you owe the government			
	c if this claim is for a c	community debt	intoxicated	ersonal injury while you were			
☐ No	im subject to offset?		Other. Specify				
Yes							

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Debtor 1

**MARCUS** 

Documentes Page 38 of 104 Your PRIORITY Unsecured Claims — Continuation Page Part 1: After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. Total claim Priority Nonpriority amount amount 2 INTERNAL REVENUE SERVICE Last 4 digits of account number 4 3 5 7 \$ 6,000.00 \$6,000.0C \$ Priority Creditor's Name PO BOX 802501 When was the debt incurred? 04/15/2016 Number As of the date you file, the claim is: Check all that apply. **CINCINNATI** OH 45280 Contingent Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated ☐ Check if this claim is for a community debt Other, Specify is the claim subject to offset? ₩ No ☐ Yes Last 4 digits of account number \_\_\_ \_\_ Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only ☐ Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were Check if this claim is for a community debt intoxicated Other, Specify Is the claim subject to offset? No No Yes Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Street As of the date you file, the claim is: Check all that apply. ☐ Contingent State ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only ☐ Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another

☐ Check if this claim is for a community debt

intoxicated

Other. Specify

Claims for death or personal injury while you were

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Debtor 1

**MARCUS** 

First Name

Middle Name

Last Name

Part 2:	List	ΑII	of	Your	NOI	NPR	HOI	₹I

	List	All	of '	Your	NOI	VP!	RIO	RITY	Unsecured	Claims
--	------	-----	------	------	-----	-----	-----	------	-----------	--------

4.	No. You have nothing to report in this part. Submit this form to the Yes  List all of your nonpriority unsecured claims in the alphabetical nonpriority unsecured claim, list the creditor separately for each claim included in Part 1. If more than one creditor holds a particular claim, claims fill out the Continuation Page of Part 2.	he court with your other schedules.  I order of the creditor who holds each claim. If a creditor has means for each claim listed, identify what type of claim it is. Do not	liet claime already
4.1	1		Total claim
Е	Nonpriority Creditor's Name	Last 4 digits of account number	¢
	The state of the s	When was the debt incurred?	Φ
	Number Street	-	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
		☐ Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	Disputed	
	Debtor 2 only	·	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another		
	☐ Check if this claim is for a community debt	Student loans  Obligations arising out of a separation agreement or divorce	
	Is the claim subject to offset?	that you did not report as priority claims	
	□ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
4.2			ramera a real seguencia de la calcina de la calcina de la comunidad de desembje e grandigues que la comune a p
7.2	No.	Last 4 digits of account number	\$
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street	-	
		As of the date you file, the claim is: Check all that apply.	
	City State ZiP Code	Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated	
	Debtor 1 only	Disputed	
	Debtor 2 only	·	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only     At least one of the debtors and another		
		☐ Student loans ☐ Obligations arising out of a separation agreement or divorce	
	☐ Check if this claim is for a community debt	that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	□ No	Other. Specify	
			ertraktyrthyrdi, y til y rikerikki traktyrka kladigat i kladigat og kreja yykki er kres k
4.3	Manager the Complete	Last 4 digits of account number	•
	Nonpriority Creditor's Name	When was the debt incurred?	\$
	Number Street		
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	, 5000	☐ Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only	- Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another		
	☐ Check if this claim is for a community debt	Student loans     Obligations arising out of a separation agreement or divorce	
	Is the claim subject to offset?	that you did not report as priority claims	
	□ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	

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Debtor 1

**MARCUS** 

Middle Name

First Name

er listing any entries on this	page, number them b	eginning with	4.4, followed by 4.5, and so forth.	Total claim
ALLIED INTERSTATE	LLC		Last 4 digits of account number 4 4 3 5	<sub>\$</sub> 763.00
Nonpriority Creditor's Name PO BOX 361774			When was the debt incurred? 04/01/2015	
Number Street COLUMBUS	ОН	43236	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Chec		IP Code	☐ Contingent ☐ Unliquidated ☐ Disputed	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an			Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a  Is the claim subject to offset?  ✓ No ☐ Yes	-		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify UNKNOWN	
	eritika tilan kanalannan gerapan gerapan gerapan gerapan berian banan kanan kanalan di banan kanalan di di per	de la ferminata de la composição de la com		4 AAE AA
UNIVERSITY OF NEBI Nonpriority Creditor's Name 2504 9TH AVENUE	RASKA		Last 4 digits of account number 9 2 1 6  When was the debt incurred? 01/07/2016	\$ <u>1,695.00</u>
Number Street KEARNEY		68849	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check Debtor 1 only		P Code	☐ Contingent☐ Unliquidated☐ Disputed☐	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and	d another		Type of <b>NONPRIORITY</b> unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a is the claim subject to offset? ☑ No			you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify FEES	
Tyes	omners om willigt follstisters of their wallenzing Albertage, op depressed grande followers.	BOT AND ROOM CONTRACTOR AND AND CONTRACTOR AND AND THE FOREIGN AND AND CONTRACTOR AND AND CONTRACTOR AND AND CONTRACTOR AND CO		erliker dat sekar fra sjak konstituting like konstituting konstitut og konstituter og konstituting skall skall
ST FRANCIS HOSPITA	L		Last 4 digits of account number 4 3 5 7	\$_3,500.00
355 RIDGE AVENUE		W-1	When was the debt incurred? 04/01/2015	
EVANSTON City		0202	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check  Debtor 1 only		<sup>2</sup> Code	☐ Contingent ☐ Unliquidated ☐ Disputed	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and	another		Type of NONPRIORITY unsecured claim:  Student loans	
☐ Check if this claim is for a deliant is the claim subject to offset?  ☑ No			<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>Debts to pension or profit-sharing plans, and other similar debts</li> <li>Other. Specify MEDICAL</li> </ul>	

☐ Yes

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Debtor 1

MARCUS

Middle Name

Last Name

Part 3:

List Others to Be Notified About a Debt That You Already Listed

		On which entry in Part 1 or Part 2 did you list the original creditor?
Name	**************************************	<del>-</del>
Number Street		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Induspoi Ottaer		Part 2: Creditors with Nonpriority Unsecured Claim
	4-4444	Last 4 digits of account number
City	State ZIP Cod	e
		On which entry in Part 1 or Part 2 did you list the original creditor?
Name		Line of (Check and) D Bod & Condition (III B) (III)
Number Street		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured
		Claims Claims
City	State ZIP Coo	Last 4 digits of account number
Vame		On which entry in Part 1 or Part 2 did you list the original creditor?
vanie		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured
		Claims
City	State ZIP Cod	Last 4 digits of account number
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
vane		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured
		Claims
Dity	State ZIP Cod	Last 4 digits of account number
		On which entry in Part 1 or Part 2 did you list the original creditor?
vame		
lumber Street		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured
		Claims Claims
Walthards I.		Last 4 digits of account number
ty modifieldshildshildshildshildshildshildshildshi	State ZIP Code	
dame		On which entry in Part 1 or Part 2 did you list the original creditor?
		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
umber Street		Part 2: Creditors with Nonpriority Unsecured Claims
ity	Cla	Last 4 digits of account number
t kaj sustantin kommende andere kaj estant kaj	State ZiP Code	
ame		On which entry in Part 1 or Part 2 did you list the original creditor?
umber Street		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
		Part 2: Creditors with Nonpriority Unsecured Claims
***************************************		_
ty	State ZIP Code	Last 4 digits of account number

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Debtor 1

**MARCUS** 

Middle Name

Last Name

Part 4:

# Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim	
Total claims	6a	Domestic support obligations	6a.	\$	0.00
from Part 1	6b. Taxes and certain other debts you owe the government		6b.	\$	0.00
	6c	. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d	. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0.00
	6e	. <b>Total.</b> Add lines 6a through 6d.	6e.	\$	0.00
				Total claim	
Total claims	6f.	Student loans	6f.	Total claim	0.00
		Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.	Total claim  \$ \$	0.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority		Total claim  \$ \$ \$	
	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other	6g.	**************************************	0.00

	ntify your case:				
Debtor 1 MARCUS		HUGHES			
First Name Debtor 2	Middle Name	Last Name			
(Spouse, if filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for	the: Northern District	of Illinois			
Case number (if known)					ck if this is ar ended filing
> cc					
Official Form 106E	<u>/F</u>				
3chedule E/F: C	reditors W	/ho Have Unsecured Clain	ns		12/15
ist the other party to any exec VB: Property (Official Form 100 reditors with partially secured	cutory contracts or u 6A/B) and on <i>Sched</i> I claims that are liste d, fill it out, number t	1 for creditors with PRIORITY claims and Part 2 for nexpired leases that could result in a claim. Also little G: Executory Contracts and Unexpired Leases (and in Schedule D: Creditors Who Have Claims Secutive entries in the boxes on the left. Attach the Contimber (if known).	ist executory c Official Form 1 red by Propert	ontracts on S 106G). Do not v. if more soa	Schedule include any ice is
art 1: List All of Your Pf	RIORITY Unsecure	ed Claims			
. Do any creditors have prior	ity unsecured claim:	s against you?			
No. Go to Part 2.					
☑ Yes.					
each claim listed, identity wha nonpriority amounts. As much	at type of claim it is. If as possible, list the c	editor has more than one priority unsecured claim, list to a claim has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditor's n Part 1. If more than one creditor holds a particular claim	nat claim here a	nd show both	priority and
		nstructions for this form in the instruction booklet.)	i, not the other t	orcators in rai	it <b>J</b> .
			Total claim	Priority amount	Nonpriority amount
7				anioun	amount
Priority Creditor's Name		Last 4 digits of account number	\$	\$	_ \$
		When was the debt incurred?			
Number Street					
	A	As of the date you file, the claim is: Check all that apply	<i>f</i>		
City	State ZIP Code	☐ Contingent			
Who incurred the debt? Chec	ck one.	Unliquidated			
Debtor 1 only		☐ Disputed			
Debtor 2 only		Type of PRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only		_			
At least one of the debtors ar	nd another	Domestic support obligations			
At least one of the debtors ar		Taxes and certain other debts you owe the government			
☐ At least one of the debtors ar ☐ Check if this claim is for a	a community debt	Taxes and certain other debts you owe the government Claims for death or personal injury while you were			
At least one of the debtors ar  Check if this claim is for a  Is the claim subject to offset	a community debt	Taxes and certain other debts you owe the government  Claims for death or personal injury while you were intoxicated			
At least one of the debtors ar  Check if this claim is for a  Is the claim subject to offset  No	a community debt	Taxes and certain other debts you owe the government Claims for death or personal injury while you were			
At least one of the debtors ar  Check if this claim is for a  Is the claim subject to offset  No	a community debt	□ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify	ern danner i vistembler de er tielle de Newsonskelse Sandle er sleene		
At least one of the debtors ar  Check if this claim is for a ls the claim subject to offset No Yes	a community debt	□ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify	ern danner i vistembler de er tielle de Newsonskelse Sandle er sleene		
At least one of the debtors are Check if this claim is for a ls the claim subject to offset No	a community debt	□ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify	ern danner i vistembler de er tielle de Newsonskelse Sandle er sleene		
At least one of the debtors ar  Check if this claim is for a  Is the claim subject to offset  No Yes	a community debt	Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify  Last 4 digits of account number	ern danner i vistembler de er tielle de Newsonskelse Sandle er sleene		
At least one of the debtors ar  Check if this claim is for a ls the claim subject to offset No Yes  Phority Creditor's Name	a community debt	Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify  Last 4 digits of account number			
At least one of the debtors ar  Check if this claim is for a ls the claim subject to offset No Yes  Phority Creditor's Name	a community debt	Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify  Last 4 digits of account number When was the debt incurred?			
At least one of the debtors ar Check if this claim is for a Is the claim subject to offset No Yes Priority Creditor's Name Number Street	a community debt	☐ Taxes and certain other debts you owe the government☐ Claims for death or personal injury while you were intoxicated☐ Other. Specify☐ Last 4 digits of account number☐ When was the debt incurred?  As of the date you file, the claim is: Check all that apply			
At least one of the debtors ar  Check if this claim is for a ls the claim subject to offset No Yes  Phority Creditor's Name  Number Street	a community debt	□ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify □ Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is: Check all that apply □ Contingent			
At least one of the debtors ar  Check if this claim is for a ls the claim subject to offset No Yes  Priority Creditor's Name  Number Street  City St  Who incurred the debt? Chec	a community debt	Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify  Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed			
At least one of the debtors ar  Check if this claim is for a  Is the claim subject to offset  No Yes  Priority Creditor's Name  Number Street  City St  Who incurred the debt? Chec Debtor 1 only Debtor 2 only	a community debt	Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify  Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim:			
At least one of the debtors ar  Check if this claim is for a  Is the claim subject to offset  No Yes  Priority Creditor's Name  Number Street  City St  Who incurred the debt? Chect Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	a community debt t?  State ZIP Code ck one.	Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify  Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Domestic support obligations			
At least one of the debtors ar  Check if this claim is for a ls the claim subject to offset No Yes  Phority Creditor's Name  Number Street  City St  Who incurred the debt? Chec Debtor 1 only Debtor 2 only	a community debt t?  State ZIP Code ck one.	□ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated □ Other. Specify □ Last 4 digits of account number □ When was the debt incurred?  As of the date you file, the claim is: Check all that apply □ Contingent □ Unliquidated □ Disputed  Type of PRIORITY unsecured claim: □ Domestic support obligations □ Taxes and certain other debts you owe the government			
At least one of the debtors ar  Check if this claim is for a  Is the claim subject to offset  No Yes  Priority Creditor's Name  Number Street  City St  Who incurred the debt? Chect Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	a community debt t?  State ZIP Code ck one.  and another a community debt	Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify  Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Domestic support obligations			

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Debtor 1

**MARCUS** 

Last Name

#### Part 1: Your PRIORITY Unsecured Claims - Continuation Page

Sheet   Sheet   Sheet   When was the debt incurred?	er listing any entries on this page, number ther	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonprior amount
As of the date you file, the claim is: Check all that apply    Contingent	Priority Creditor's Name	Last 4 digits of account number	\$	. \$	. \$
As of the date you file, the claim is: Check oil that apply		When was the debt incurred?			
Contingent   Disputed	Number Street	As of the date you file, the claim is: Check all that apply			
Uniquidated   Disputed   Debtor 1 only   Debtor 2 only   Debtor 3 and Debtor 2 only   Debtor 3 and Debtor 4 and Debtor 5 and Debtor 6 and Debtor 7 and Debtor 8					
Who incurred the debt? Check one.    Destor 1 only   Destor 2 only   Destor 3 only   Destor 3 only   Destor 4 of better 2 only   Destor 4 only   Destor 4 only   Destor 5 only   Destor 5 only   Destor 5 only   Destor 5 only   Destor 6 only   Destor 6 only 6 only   Destor 6 only 6 on	City State ZIP Code				
Debtor 1 only   Debtor 2 only   Debtor 3 only   Debtor 4 only   Debtor 4 only   Debtor 4 only   Debtor 5 only   Debtor 6 only   Debtor 7 only   Debtor 1 only   Debtor 8 only   Debtor 1 only   Debtor 1 only   Debtor 1 only   Debtor 6 only   Debtor 7 only   Debtor 8 onl		•			
Debtor 2 cnly					
Debtor 1 and Debtor 2 only		Type of PRIORITY unsecured claim:			
At least one of the debtors and another   Claims for death or personal injury while you were intoxicated   Claims subject to offset?   No   Yes   No   No   No   Yes   No   No   No   No   No   No   No   N		• • • • • • • • • • • • • • • • • • • •			
Check if this claim is for a community debt   Check all that apply   Conditions and another   Check if this claim is for a community debt   Check all that apply   Check one   Check if this claim is for a community debt   Check one   Check if this claim is for a community debt   Check one   Check all that apply   Check one   Check if this claim is for a community debt   Check one   Check if this claim is for a community debt   Check one   Check if this claim is for a community debt   Check one   Check if this claim is for a community debt   Check one   Check if this claim is for a community debt   Check one   Check if this claim is for a community debt   Check one   Check if this claim is for a community debt   Check one   Check if this claim is for a community debt   Check one   Check if this claim is for a community debt   Check one   Check if this claim is for a community debt   Check one   Check if this claim is for a community debt   Check one   Check if this claim is for a community debt   Check one   Check if this claim is for a community debt   Check of the debtor 2 only   Check of the debtor 2 only   Check of the debtor 3 only   Check of the debtor 3 only   Check of the debtor 3 only   Check of the debtor 4 only   Check of the debtor 4 only   Check of the debtor 4 only   Check of the debtor 5 only   Check if this claim is for a community debt   Check of the debtor 5 only   Check if this claim is for a community debt   Check of the debtor 5 only   Check if this claim is for a community debt   Check if this claim is for a community debt   Check of the debtor 5 only   Check if this claim is for a community debt   Check of the debtor 5 only   Check if this claim is for a community debt   Check of the debtor 5 only   Check if this claim is for a community debt   Check of the debtor 5 only   Check if this claim is for a community debt   Check of the debtor 5 only   Check if this claim is for a community debt   Check of the debtor 5 only   Check if this claim is for a community debt   Check of the debtor 5 o					
Is the claim subject to offset?  No   Yes   Yes    Number   Steel   When was the debt incurred?  As of the date you file, the claim is: Check all that apply    Coty   State   ZiP Code   Uniquidated   Disputed   Disputed    Who incurred the debt? Check one.     Debtor 1 and Debtor 2 only   Type of PRIORITY unsecured claim:     Check if this claim is for a community debt     Is the claim subject to offset?     No     As of the date you file, the claim is: Check all that apply     Contingent     Uniquidated     Disputed     Demonstrative debts you owe the government     Claims for death or personal injury while you were intoxicated     Other: Specify     As of the date you file, the claim is: Check all that apply     City   State   ZiP Code     When was the debt incurred?     As of the date you file, the claim is: Check all that apply     City   State   ZiP Code     Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only     Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only     Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only     Debtor 1 and Debtor 2 only   Debt		intoxicated			
No	Is the claim subject to offset?	Grief, Specify			
When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  City State ZIP Code   Unliquidated   Disputed    Who incurred the debt? Check one.   Debtor 1 and Debtor 2 only   Demostic support obligations   Taxes and certain other debts you owe the government   Claims stor death or personal injury while you were invoiced   Other. Specify   Unliquidated   Other in and Debtor 2 only   Demostic support obligations   Taxes and certain other debts you owe the government   Claims for oeath or personal injury while you were invoiceded   Other. Specify    Is the claim subject to offset?  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent   Unliquidated   Disputed    Who incurred the debt? Check one.   Debtor 1 only   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 3 only   Debtor 1 only   Debtor 2 only   Domestic support obligations   Taxes and certain other debts you owe the government   Claims for death or personal injury while you were introced.  Is the claim subject to offset?	□ No				
When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Uniquidated Disputed  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 3 and Debtor 3 and Debtor 3 and other Claims to death or personal injury while you were incompleted incurred?  As of the date you file, the claim is Check all that apply.  Type of PRIORITY unsecured claim: Claims for death or personal injury while you were incovated Other. Specify  No Yes.  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Uniquidated Other. Specify  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Uniquidated Disputed  Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Check if this claim is for a community debt Is the claim subject to offset?  No Check if this claim is for a community debt Is the claim subject to offset?		Last 4 digits of account number	\$	\$	\$
As of the date you file, the claim is: Check all that apply    Contingent	Priority Creditor's Name	Last + digits of account number	Y-11-11-11-11-11-11-11-11-11-11-11-11-11	. Y.	<u> </u>
Contingent Unliquidated Disputed  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes  Last 4 digits of account number Street  As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed  Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only As of the date you file, the claim is: Check all that apply Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Who incurred the debt? Check one. Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Disputed  Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify  Other. Specify Other. Specify Other. Specify	Number Street	When was the debt incurred?			
Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 and Debtor 2 only Check if this claim is for a community debt  Is the claim subject to offset?  No Yes  Last 4 digits of account number Street  As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Demonstration of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify  When was the debt incurred?  As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Street  Type of PRIORITY unsecured claim: Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Demonstration of the debtor you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Other. Specify Other. Specify		As of the date you file, the claim is: Check all that apply.			
Who incurred the debt? Check one.  Disputed  Type of PRIORITY unsecured claim:  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify  No Yes  Last 4 digits of account number Street  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Unliquidated Disputed  Type of PRIORITY unsecured claim: Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify  Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify		☐ Contingent			
Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes  Last 4 digits of account number Street  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify  Type of PRIORITY unsecured?  As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed  Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify  Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify  Other. Specify	City State ZIP Code				
Debtor 1 only	Who increased the debag of the	☐ Disputed			
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt		Time of DDIODITY are a state of state of			
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ No □ Yes □ Last 4 digits of account number □ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		Type of PRIORITY unsecured claim:			
At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  No Yes  Last 4 digits of account number \$ \$ \$ \$  Priority Creditor's Name  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Uniquidated Disputed  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  No No					
Check if this claim is for a community debt   Other. Specify	· · · · · · · · · · · · · · · · · · ·				
Other. Specify     No	Check if this claim is for a community debt				
Last 4 digits of account number  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Check it this claim is for a community dept	Other. Specify			
Last 4 digits of account number\$\$\$	Is the claim subject to offset?				
Pronty Creditor's Name  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify  Is the claim subject to offset?					
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When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt sthe claim subject to offset?  No  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Toneck all that apply.  Debtor all Unliquidated Disputed  Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify  No		Last 4 digits of account number	\$	\$	\$
As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Claims for death or personal injury while you were intoxicated Other. Specify  Is the claim subject to offset?	Priority Creditor's Name				
Contingent Unliquidated Disputed  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Check if this claim is for a community debt  s the claim subject to offset?  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim:  Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify  No	Number Street	When was the debt incurred?			
Unliquidated Disputed  Who incurred the debt? Check one.  Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt  s the claim subject to offset?  Unliquidated Disputed  Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify  No		As of the date you file, the claim is: Check all that apply.			
Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  Disputed  Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify  Other. Specify		☐ Contingent			
Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify Is the claim subject to offset?	City State ZIP Code				
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Sthe claim subject to offset? □ No	Who incurred the debt? Check one.	☐ Disputed			
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Sthe claim subject to offset? □ No		Type of PRIORITY unsecured claim:			
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Stee Claims subject to offset? □ No		••			
☐ Claims for death or personal injury while you were intoxicated ☐ Check if this claim is for a community debt ☐ Check if this claim is for a community debt ☐ Other. Specify					
☐ Check if this claim is for a community debt ☐ Other. Specify	At least one of the debtors and another				
s the claim subject to offset? □ No	Check if this claim is for a community debt	intoxicated	erri e et retambhh de mhet e sprijeet pre ande eest fir geh	terrelenk errele (mede de perdipad) per nyade), kek difte mele	a a material de la Pagada (filosopia a 11 <sup>11</sup> , la la 1112) de 1112 april a
	s the claim subject to offset?				
□ Yes					

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Debtor 1

**MARCUS** 

Last Name

art 2:	List All of	Your NONPRI	ORITY Unse	cured Claims

3.	Do any creditors have nonpriority unsecured cla  No. You have nothing to report in this part. Subn  Yes			
	nonpriority unsecured claim, list the creditor separate	ely for each clai	I order of the creditor who holds each claim. If a creditor has im. For each claim listed, identify what type of claim it is. Do not, list the other creditors in Part 3.ff you have more than three no	list claims already
_	1			Total claim
4.1			Last 4 digits of account number	
	Nonpriority Creditor's Name	·		\$
	Number Street		When was the debt incurred?	
	City State	ZIP Code	As of the date you file, the claim is: Check all that apply.	
			Contingent	
	Who incurred the debt? Check one.		Unliquidated	
	Debtor 1 only		☐ Disputed	
	Debtor 2 only		Town of MONEDIODITY and a second of the	
	Debtor 1 and Debtor 2 only  At least one of the debtors and another		Type of NONPRIORITY unsecured claim:	
			Student loans	
	Check if this claim is for a community debt		<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	Is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts	
	Yes		Other. Specify	
4.2			Last 4 digits of account number	\$
L	Nonpriority Creditor's Name		When was the debt incurred?	
	Number Street		As of the date you file, the claim is: Check all that apply.	
	City State 2	ZIP Code	Contingent	
	Who incurred the debt? Check one.		Unliquidated	
			Disputed	
	Debtor 1 only Debtor 2 only			
	Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another		Student loans	
	At least one of the deptors and another		Obligations arising out of a separation agreement or divorce	
	☐ Check if this claim is for a community debt		that you did not report as priority claims	
	Is the claim subject to offset?		Debts to pension or profit-sharing plans, and other similar debts	
	□ No		Other. Specify	
	Yes			
4.3	torrententian in attaction on contra reconstruction of which contracts of the property of the	eranan menaren araban ganganyan yang melapungan gang	1/3 and $1/3$	representation and the consequence of the consequence and the cons
L	Nonpriority Creditor's Name		Last 4 digits of account number	\$
	Troughtonly orealists trained		When was the debt incurred?	*
	Number Street		м.	
	City State 2	ZIP Code	<ul> <li>As of the date you file, the claim is: Check all that apply.</li> </ul>	
	Who incurred the debt? Check one.		☐ Contingent	
	Debtor 1 only		Unliquidated	
	Debtor 2 only		☐ Disputed	
	Debtor 1 and Debtor 2 only		T (NONDOLORIE)	
	At least one of the debtors and another		Type of NONPRIORITY unsecured claim:	
			Student loans	
	☐ Check if this claim is for a community debt		Obligations arising out of a separation agreement or divorce	
	Is the claim subject to offset?		that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	□ No		Other. Specify	
	Yes		_ Cost. Opening	

Part 2:

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Debtor 1

**MARCUS** 

Your NONPRIORITY Unsecured Claims — Continuation Page

Afte	r listing any entries on this page	e, number the	em beginning wit	h 4.4, followed by 4.5, and so forth.	Total claim
44	US EMPLOYEES CREDIT	UNION		Last 4 digits of account number	\$_3,500.00
	Nonpriority Creditor's Name 230 S DEARBORN ST, St	JITE 2982		When was the debt incurred? 05/01/2008	
	Number Street CHICAGO	IL	60604	As of the date you file, the claim is: Check all that apply.	
	City	State	ZiP Code	Contingent	
				Unliquidated	
	Who incurred the debt? Check one	<b>∄</b> .		☐ Disputed	
	Debtor 1 only Debtor 2 only			Tune of NONDRIORITY unacquired claims	
	Debtor 2 only  Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and an	other		<ul> <li>☐ Student loans</li> <li>☐ Obligations arising out of a separation agreement or divorce that</li> </ul>	
	☐ Check if this claim is for a cor	nmunitu daht		you did not report as priority claims	
		iiiiiaiiity aebt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			Other, Specify LOAN	
	wad No ☐ Yes				
4	US EMPLOYEE CREDIT	JNION	ich dage (Stam V) wellsweit zu were billijken werd einer fiel der einer ein der Lichte (wert die Schreib) werd der der	Last 4 digits of account number	\$ 2,000.00
	Nonpriority Creditor's Name				
	230 S DEARBORN ST, SU	JITE 2982		— — — — — — — — — — — — — — — — — — —	
	Number Street CHICAGO	IL	60604	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
				Unliquidated	
	Who incurred the debt? Check one	<del>)</del> .		☐ Disputed	
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Deptor 2 only  Debtor 1 and Debtor 2 only				
	At least one of the debtors and an	other		<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>	
	Check if this claim is for a cor			you did not report as priority claims	
		nmunity debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			Other. Specify_LOAN	
	☑ No □ Yes				
ń	regionalization, especialization propriessore, en en conjunt processor en entre con un consultation en en en e	tani da kata da manga kata da k	The established development and account and the state of		<sub>\$</sub> 24,780.00
	US EMPLOYEES CREDIT	UNION		Last 4 digits of account number	
	Nonpriority Creditor's Name	HTE 2002		When was the debt incurred? 08/01/2006	
	230 S DEARBORN ST, SUNMER Street	JIIE 2902		nderer	
	CHICAGO	IL	60604	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one	<b>a</b>		Unliquidated	
	Debtor 1 only	•.		☐ Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			☐ Student loans	
	At least one of the debtors and and	other		Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a cor	nmunity debt		you did not report as priority claims	
	Is the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify LOAN	
	No			GO Other, Specify LOCK	
	Yes				

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Debtor 1

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Part 3:

### List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Nome				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of account number
City		State	ZIP Code	On which potant in Post 4 or Post 2 did you liet the edicinal condition?
Name			***************************************	On which entry in Part 1 or Part 2 did you list the original creditor?
Number	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured
				Claims
City		State	ZIP Code	Last 4 digits of account number
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check one):
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of account number
City		State	ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name			**************************************	_
Number	Street			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured
		***************************************	····	Claims
City	TANDOM STATE OF THE STATE OF TH	State	ZIP Code	Last 4 digits of account number
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
1Vallie				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of account number
City	andron's Mondie (sofeliad) of Civillad (Astronoliae) obtained Antiliae Borgin (Ia à C	State substitution of the book of the control of th	ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name				· · ·
Number	Street	· · · · · · · · · · · · · · · · · · ·		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured
				Claims
City		State	ZIP Code	Last 4 digits of account number
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
	Character		**************************************	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
City		01-	700-1-	Last 4 digits of account number
City		State	ZiP Code	The second secon

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Debtor 1

**MARCUS** 

Part 4:

# Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim	
Total claims	6a.	Domestic support obligations	6a.	\$	0.00
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6¢.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0.00
	6e.	Total. Add lines 6a through 6d.	6e.	\$	0.00
				Total claim	
Total claims	6f.	Student loans	6f.	\$	0.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
		<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$	0.00
	6j. <b>-</b>	<b>Fotal.</b> Add lines 6f through 6i.	6j.	\$	0.00

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Debtor 1 MARCUS    First Name   Mode Name   Lest Name   Lest Name	Fill in this in	nformation to identify your cas	Document 1 age 49 or 1	
Debto 2 Second fring) Pretables  Late Name  John Northern District of Illinois  Case number  Cas				
Check if this growth   Continuence   Conti	Debtor 1			
United States Bankruptcy Court for the: Northern District of Illinois  Case number (1 known)  Official Form 106E/F  Schedule E/F: Creditors Who Have Unsecured Claims  12  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claim. List the other party (0fficial Form 106AB) and on Schedule 6: Executory Contracts and Unexprined Leases (0fficial Form 106AB) and on Schedule 6: Executory Contracts and Unexprined Leases (0fficial Form 106AB) and on Schedule 6: Executory Contracts and Unexprined Leases (0fficial Form 106AB) and on Schedule 6: Executory Contracts and Unexprined Leases (0fficial Form 106AB) and on Schedule 6: Executory Contracts and Unexprined Leases (0fficial Form 106AB) and on Schedule 6: Executory Contracts and Unexprined Leases (0fficial Form 106AB) and on Schedule 6: Executory Contracts and Unexprined Leases (0fficial Form 106AB) and on Schedule 6: Executory Contracts and Unexprined Leases (0fficial Form 106AB) and on Schedule 6: Creditors Who Have Claims Secured by Property. It more space is needed, copy the Part you need the Property. It more space is not include the Part you need the Property. It more space is not include the Part you needed, copy the Part you need the Property of the Part you need the Property of the Part you needed, copy the Part you needed, copy the Part you need the Part you need the Part you needed, copy the Part you need the Part you need the Part you needed, copy the Part you need the Part you need the Part you needed, copy the Part you need the Part you needed, copy the Part you need the Part you need the Part you needed, copy the Part you need the Part you need the Part you nee				
Official Form 106E/F  Schedule E/F: Creditors Who Have Unsecured Claims  12  Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claim. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule Carectory Contracts and Unexpired Leases (Official Form 106Ab) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106Ab) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106B). Do not include creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the training and pages, write your name and case number (if known).  Part 11: List All of Your PRIORITY Unsecured Claims  1. Do any creditors have priority unsecured claims against you?  No. 60 to Part 2.  Yes.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. each claim listed, identify what type of claim is it is a claim has both priority and nonpriority amounts, list that claim here and show both priority and	(Spouse, if filing)	) First Name Middle N	ne Last Name	
Official Form 106E/F  Schedule E/F: Creditors Who Have Unsecured Claims  12  Schedule E/F: Creditors Who Have Unsecured Claims  13  14  15  15  16  16  17  17  18  18  18  18  19  19  19  19  19  19	United States	Bankruptcy Court for the: Northern	istrict of Illinois	F** <b>1</b>
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claim. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 108A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 108G). Do not include creditors with partially secured claims that are listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 108G). Do not include creditors with partially secured claims that are listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 108G). Do not include creditors with partially secured by Property, if more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the transport of the page of Part 1 in the page of Part 1 in the page of Part 2 in the Schedule G: Creditors What I is a claim as against you?    No. Go to Part 2.		was delicated and the second and the		☑ Check if this is amended filing
Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claim. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AB- Property (Official Form 106AID) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the transpace of the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the transpace of the Property of Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the transpace of the Property of Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the transpace of the Property of Property. If more space is needed, copy the Part you need this page. On the transpace of Property of Property of Property. If more space is needed, copy the Part you need to property of Property. If more space is needed, copy the Part you need to Property. If more space is needed, copy the Part you need to Property. If more space is needed, copy the Part you need to Property. If more space is needed, copy the Part 2 of Property of Proper	Official F	Form 106E/F		
List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule AB: Property (Official Form 106A)B) and on Schedule 6: Executory Contracts and Unexpired Lease (Official Form 106G). On to include creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the transport of the Party on the Party of the Calimin Secured claims, should be party on the Party of the Party of the Party of the Party of the Party	Schedi	ule E/F: Credito	s Who Have Unsecured	d Claims 12/15
1. Do any creditors have priority unsecured claims against you?    No. Go to Part 2.   Yes	List the other A/B: Property creditors with needed, copy any additiona	r party to any executory contra   (Official Form 106A/B) and on  n partially secured claims that  the Part you need, fill it out, n  al pages, write your name and	s or unexpired leases that could result in a classification of the country of the	claim. Also list executory contracts on Schedule ired Leases (Official Form 106G). Do not include an Claims Secured by Property. If more space is
No. Go to Part 2.  Yes.  2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. each claim listed, identify what type of claim it is. If a claim has both priority amounts, list that claim here and show both priority a nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priori unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  Total claim Priority Non amount amo				
2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. each claim listed, identify what type of claim it is. If a claim has both priority amounts, list that claim here and show both priority and control yamounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.  Total claim Priority Non amount amount for amount amou	_	•	claims against you?	
2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim each claim listed, identify what type of claim it is. If a claim has both priority and onspriority amounts, list that claim here and show both priority and priority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)  Total claim Priority Non amount name    Total claim Priority Non amount name   Number   Street   S   S   S		Jio Pail 2.		
Contingent   Con	<ol><li>List all of each claim nonpriority unsecured</li></ol>	n listed, identify what type of claim or amounts. As much as possible, or claims, fill out the Continuation f	t is. If a claim has both priority and nonpriority and it the claims in alphabetical order according to the ige of Part 1. If more than one creditor holds a pa	imounts, list that claim here and show both priority and he creditor's name. If you have more than two priority particular claim, list the other creditors in Part 3.
As of the date you file, the claim is: Check all that apply  City State ZIP Code Unliquidated Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No  2  Last 4 digits of account number S \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	(For an exp	planation of each type of claim, s	e the instructions for this form in the instruction bo	
Last 4 digits of account number   S   S   S				
Priority Creditor's Name    When was the debt incurred?	!.1		l ast 4 digits of account number	\$ \$ \$
As of the date you file, the claim is: Check all that apply  City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes  As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify  Last 4 digits of account number	Priority Cred	ditor's Name	-	
City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only  Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  No  Yes  Contingent  Unliquidated Disputed  Type of PRIORITY unsecured claim:  Domestic support obligations  Taxes and certain other debts you owe the government  Claims for death or personal injury while you were intoxicated  Other. Specify  Last 4 digits of account number	Number	Street	When was the debt incurred?	
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Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No No Other. Specify  Last 4 digits of account number	0.4.	0	Continuent	
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At least one of the debtors and another  Check if this claim is for a community debt Is the claim subject to offset?  No  Yes  Last 4 digits of account number				
Check if this claim is for a community debt Is the claim subject to offset?  No Yes  Last 4 digits of account number			., -	
Is the claim subject to offset?  No Other. Specify  Yes  Last 4 digits of account number				
Other. Specify  Yes  Last 4 digits of account number		•	Claims for death or personal injury while y	you were
Yes  2 Last 4 digits of account number		in subject to onset?		
2 Last 4 digits of account number				
Priority Creditor's Name  Last 4 digits of account number\$\$\$\$\$	.2	тын штанан аянын алышкан үчкөндү келдага дайга дайгагт кетин алып алып алып алып алып дагуулуу.		
	Priority Credi	litor's Name		
When was the debt incurred?  Number Street	<u> </u>		when was the debt incurred?	<del></del>
Number Street  As of the date you file, the claim is: Check all that apply	Numper	2fleet	As of the date you file, the claim is: Check	eck all that apply
Contingent			☐ Contingent	,,,
City State ZIP Code Unliquidated	City	State ZIP Co		
Who incurred the debt? Check one.	Who incu	irred the debt? Check one.	☐ Disputed	
Debtor 1 only  Type of PRIORITY unsecured claim:		•	Type of PRIORITY unsecured claims	
Deptor 2 only		•		
Deplor I and Deplor 2 only	mm.	•		he government
At least one of the deptors and another			D object to the second state of the second sta	-
Check if this claim is for a community debt	☐ Check	if this claim is for a community		you were
Is the claim subject to offset?  Other. Specify  Yes				

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Debtor 1

**MARCUS** First Name

Middle Name

Last Name

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□ No □ Yes  Last 4 digits of account number □ Priority Creditor's Name  When was the debt incurred?  As of the date you file, the claim is □ Contingent	aim:  owe the government while you were	\$\$		\$
When was the debt incurred?  As of the date you file, the claim is Contingent Unliquidated Disputed  Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt  Is the claim subject to offset? No Yes  Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is Contingent Unliquidated Disputed  When was the debt incurred?  As of the date you file, the claim is Contingent Unliquidated Disputed	aim: owe the government while you were			
As of the date you file, the claim is  City State ZIP Code Unliquidated Disputed  Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt  Is the claim subject to offset? No Yes  Last 4 digits of account number  When was the debt incurred?  As of the date you file, the claim is Contingent Unliquidated Disputed  When was the debt incurred?  As of the date you file, the claim is Contingent Unliquidated Disputed	aim: owe the government while you were			
City State ZIP Code Unliquidated Disputed  Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured cl. Debtor 2 only Debtor 1 and Debtor 2 only Domestic support obligations Taxes and certain other debts you Claims for death or personal injury intoxicated Other. Specify  Is the claim subject to offset? No Yes  Last 4 digits of account number When was the debt incurred?  As of the date you file, the claim is Contingent Unliquidated Disputed	aim: owe the government while you were			
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□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Other. Specify □ No □ Yes □ No □ Yes □ No □ Yes □ When was the debt incurred? □ As of the date you file, the claim is □ Contingent □ Unliquidated □ Disputed	owe the government while you were			
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Other. Specify □ No □ Yes □ No □ Yes □ No □ Yes □ When was the debt incurred? □ As of the date you file, the claim is □ Contingent □ Unliquidated □ Disputed	while you were			
□ At least one of the debtors and another □ Check if this claim is for a community debt □ Check if this claim is for a community debt □ Other. Specify □ No □ Yes □ No □ Yes □ Last 4 digits of account number □ When was the debt incurred? □ As of the date you file, the claim is □ Contingent □ Unliquidated □ Disputed	while you were			
Check if this claim is for a community debt  Is the claim subject to offset?  No Yes  Last 4 digits of account number  Priority Creditor's Name  When was the debt incurred?  As of the date you file, the claim is  City  State  ZIP Code  Unliquidated  Disputed				
Is the claim subject to offset?  No Yes  Last 4 digits of account number  Priority Creditor's Name  When was the debt incurred?  As of the date you file, the claim is  Contingent Unliquidated Disputed				
□ No □ Yes    Last 4 digits of account number _	v n a, n and the robbids are the publisher of the p			
☐ Yes  Last 4 digits of account number _ Priority Creditor's Name  When was the debt incurred?  As of the date you file, the claim is  ☐ Contingent ☐ Unliquidated ☐ Disputed	y ris mind the mind the mind which will be placed any enterministic purposes the depth and a find a price and a find a fi			
Priority Creditor's Name  When was the debt incurred?  As of the date you file, the claim is  Contingent Unliquidated Disputed	r de minde kaminet i Eleminet i Santaka i I			
When was the debt incurred?  Number Street  As of the date you file, the claim is  City Stale ZIP Code Unliquidated  Disputed		ritant arabant stran til et redam til en arab	liika esta enthamos li teranete a considera in esta consenia.	e en millione et l'armanage millione en l'arm
When was the debt incurred?  Number Street  As of the date you file, the claim is  City State ZIP Code Unliquidated  Disputed	.5	\$		\$
As of the date you file, the claim is  City State ZIP Code Unliquidated  Disputed	territorio estantene vicanes en	·		*
As of the date you file, the claim is  City State ZIP Code Unliquidated  Disputed				
City State ZIP Code Unliquidated Disputed	. Check all that apply			
City State ZIP Code Unliquidated  Disputed	т, спеск ан that apply.			
☐ Disputed				
Debtor 1 only  Type of PRIORITY unsecured cla	im:			
Debtor 2 only  Domestic support obligations				
Debtor 1 and Debtor 2 only  At least one of the debtors and another  At least one of the debtors and another	· · · · · · · · · · · · · · · · · · ·			
Claims for death or personal injury	while you were			
☐ Check if this claim is for a community debt ☐ Other. Specify				
s the claim subject to offset?				
□ No				
The Section of the Control of the Co	mbremilien ih Tilmindi kannigus III dengi mgagilindi, bendaharan kanjangan kannigang kannan da disengan kanna	والمسعود ومراهدة معاود المدومة إذا موازات مسروب	onliggerios libras daliprias income	nahaladijeegerjarijaraasjin.
Last 4 digits of account number	\$	\$	:	\$
Pnority Creditor's Name				
When was the debt incurred?				
As of the date you file, the claim is	: Check all that apply.			
Contingent	.,,			
City State ZIP Code Unliquidated				
☐ Disputed				
Who incurred the debt? Check one.	t			
Debtor 1 only  Type of PRIORITY unsecured cla	um:			
Domestic support obligations				
At least one of the debters and another	-			
Check if this claim is for a community debt intoxicated	wniie you were	and our live from inclines for visions is to a vision	and the discount of the section of t	alderidaen didusellust vahriblen vaal.
Other. Specify				

☐ Yes

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Debtor 1

**MARCUS** First Name

Middie Name

3. Do any creditors have nonpriority unsecured claims against you?

Last Name

ľ	3	÷	ľ	ľ	ı	2	ř	

### List All of Your NONPRIORITY Unsecured Claims

	☐ No. You have nothing to report in this part. Submit this ☑ Yes	form to the court with your other schedules.	
4. L	ist all of your nonpriority unsecured claims in the alp	habetical order of the creditor who holds each claim. If a creditor has	
i		each claim. For each claim listed, identify what type of claim it is. Do not ular claim, list the other creditors in Part 3.If you have more than three no	
	James III out the continuation ( age c. ) at 2.		Total claim
4.1		Last 4 digits of account number	•
	Nonpriority Creditor's Name	When was the debt incurred?	<b>4</b>
	Number Street		
	City State ZIP Cod	As of the date you file, the claim is: Check all that apply.	
	Who forward the debt Office	Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	Disputed	
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	□ No	Other, Specify	
	Yes		
4 2		Last 4 digits of account number	\$
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	City State ZIP Cod	Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	_ <u></u>	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	No	Other. Specify	
			engannegan negaranneg nem generate nemalitære en træme nætara at nætar til at træme en træme fra til det
4.3		Last 4 digits of account number	\$
	Nonpriority Creditor's Name	When was the debt incurred?	Ψ
	Number Street		
	City State ZIP Cod		
	Who incurred the debt? Check one.	Contingent	
	Debtor 1 only	Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another		
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce	
	Is the claim subject to offset?	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	□ No	Other. Specify	
	☐ Yes	— Ostor. Opcons	
			,,,

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 MARCUS
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Debtor 1

First Name

Middle Name

Last Name

Your NONPRIORITY Unsecured Claims — Continuation Page Part 2:

Afte	er listing any entries on this page, r	number th	em beginning witl	n 4.4, followed by 4.5, and so forth.	Total claim
44	US EMPLOYEES CREDIT U	INION		Last 4 digits of account number	s 10,732.00
	Nonpriority Creditor's Name 230 S DEARBORN ST, SUIT	TE 2982		When was the debt incurred? 10/01/2009	
	Number Street CHICAGO	IL	60604	As of the date you file, the claim is: Check all that apply.	
	Crity	State	ZIP Code	Contingent	
				Unliquidated	
	Who incurred the debt? Check one.			☐ Disputed	
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			☐ Student loans	
	At least one of the debtors and anoth	er		Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a comm	unity debt		you did not report as priority claims	
	Is the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify LOAN	
	₩ No				
	Yes	auero a entre esta de la compansa d			Namunianomian Iribia (Namiim) mileisy vijamom
4 1	SYNC B/M WARDS			Last 4 digits of account number	\$ <u>439.00</u>
	Nonpriority Creditor's Name PO BOX 965005			When was the debt incurred? 10/01/2007	
	Number Street ORLANDO	FL.	32896	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
				Unliquidated	
	Who incurred the debt? Check one.			☐ Disputed	
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			☐ Student loans	
	At least one of the debtors and anoth	ег		Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a comm	unity debi		you did not report as priority claims	
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts  Other. Specify CREDIT CARD	
	Mo No			other. Specify Orthe Diff Ortho	
	Yes				ang spipe paga pang salam an and pengangan dalah s
đ	NO EMPLOYEES ASSESSED			Last 4 digits of account number	\$_6,500.00
	US EMPLOYEES CREDIT UNOnpriority Creditor's Name	INION	<del>`</del>	<del></del>	
	230 S DEARBORN ST, SUIT	ΓE 2982		When was the debt incurred? 10/01/2007	
	Number Street CHICAGO	IL	60604	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one.			Unliquidated	
	Debtor 1 only			☐ Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			☐ Student loans	
	At least one of the debtors and anoth	ег		Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a comm	unity debt	:	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			✓ Other. Specify LOAN	
	₩ No				
	T Vec				

Case 16-20325

Documents

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Debtor 1

**MARCUS** 

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Part 3:

List Others to Be Notified About a Debt That You Already Listed

				On which entry in Part 1 or Part 2 did you list the original creditor?
ame .	**************************************		·······	
		· .		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber	Street		. r	Part 2: Creditors with Nonpriority Unsecured Clair
				Last 4 digits of account number
ity	A williand alliance & symmetric tracking materials and	State .	ZIP Code	്യവാന്ത്ര പരിച്ചത്ത് പട്ടെട്ട് ചിട്ടത്ത്രയാണ് പട്ടെട്ട് വാണ്ട്രം വാരുന്നു. വാരുന്നു വാരുന്നു വാരുന്നു വാരുന്നു വാരുന്നു വാരുന്നു വാരുന്നു വാരുന്നു. വാരുന്നു വാരുന്നു വാരുന്നു വാരുന്നു വാരുന്നു വാരുന്നു വാരുന്നു. വാരുന്നു വാരുന്നു വാരുന്നു വാരുന്നു വാരുന്നു വാരുന്നു വാരുന്നു വാരുന്നു.
				On which entry in Part 1 or Part 2 did you list the original creditor?
ame				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
lumber	Street		·····	Part 2: Creditors with Nonpriority Unsecured
				Claims
ity	-	State	ZIP Code	Last 4 digits of account number
**************************************				On which entry in Part 1 or Part 2 did you list the original creditor?
lame				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
lumber	Street	······································		☐ Part 2: Creditors with Nonpriority Unsecured
			<u></u>	Claims
itiz		State	ZIP Code	Last 4 digits of account number
te de partir de la company de la company La company de la company de La company de la	t de spectruming et homes times i night et handereden te wille dervie	ing ang pantinuning pengenjangan pengengan pengengan pengengan pengenjangan pengenjangan pengenjangan pengenja Pengenjangan pengenjangan pengenjangan pengenjangan pengenjangan pengenjangan pengenjangan pengenjangan pengen		On which entry in Part 1 or Part 2 did you list the original creditor?
lame				_
			***************************************	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
iumber	Street			Part 2: Creditors with Nonpriority Unsecured Claims
		State	ZIP Code	Last 4 digits of account number
ity waannin an manaan a	والمراجعة والمدارية	DIGG	ZIF COGE	On which entry in Part 1 or Part 2 did you list the original creditor?
lame				
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
lumber	Street			Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of account number
ity		State	ZIP Code	Last 4 tigits of account multiper
				On which entry in Part 1 or Part 2 did you list the original creditor?
iame				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
lumber	Street	· · · · · · · · · · · · · · · · · · ·	*****	Part 2: Creditors with Nonpriority Unsecured
			<del></del>	Claims
ihi	····	State	ZIP Code	Last 4 digits of account number
ity	Copyrighted the construction of the constructi		CHECKER CORP.	On which entry in Part 1 or Part 2 did you list the original creditor?
ame				
umber	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
				Part 2: Creditors with Nonpriority Unsecured Claims

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Debtor 1

**MARCUS** 

Part 4:

# Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims	6a. Domestic support obligations		s0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	s0.00
	6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	+ \$ 0.00
	6e. <b>Total.</b> Add lines 6a through 6d.	6e.	\$ 0.00
			Total claim
Total claims	6f. Student loans	6f.	\$0.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	s0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$
	<ol><li>Other. Add all other nonpriority unsecured claims. Write that amount here.</li></ol>	6i.	+ s0.00
	6j. <b>Total.</b> Add lines 6f through 6i.	6j.	s0.00

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Fil	l in this i	nformation to ident	tify your case:	Document 1 age 30	7 01 104			
De	btor 1	MARCUS		HUGHES				
		First Name	Middle Name	Last Name				
	btor 2 ouse, if filing	) First Name	Middle Name	Last Name				
Uni	ited States	Bankruptcy Court for the	he: Northern District	of Illinois				
	se number known)							ck if this is an nded filing
<u>Of</u>	ficial l	Form 106E/	<u>'F</u>					
Sc	hed	ule E/F: C	reditors W	/ho Have Unsec	ured Claim	ıs		12/15
List A/B: cred need any	the other Property litors with ded, copy additiona	r party to any exect (Official Form 106 h partially secured the Part you need al pages, write you	utory contracts or u 6A/B) and on Sched claims that are liste	,	t in a claim. Also lis Unexpired Leases (C Have Claims Secure	t executory co Official Form 19 and by Property	ontracts on S 06G). Do not . If more space	chedule include any ce is
1. [	Do any cr	editors have priori	ty unsecured claims	s against you?				
		o to Part 2.	•					
2. l e	each clain nonpriority	n listed, identify what amounts. As much	t type of claim it is. If as possible, list the o	editor has more than one priority un a claim has both priority and nonpri claims in alphabetical order accordi Part 1. If more than one creditor ho	iority amounts, list tha ng to the creditor's na	at claim here ar ime. If you have	nd show both p e more than tv	oriority and vo priority
			•	nstructions for this form in the instr	•	Total claim	Priority	Nonpriority
2.1							amount	amount
	Priority Cre	ditor's Name		Last 4 digits of account number		\$	\$	_ \$
	Number	Street		When was the debt incurred?				
	- Normodi	Guest		As of the date you file, the claim	is: Check all that apply			
	City		State ZIP Code	Contingent				
	•	s urred the debt? Chec		☐ Unliquidated				
	Debto		ck one.	☐ Disputed				
	Debto	•		Type of PRIORITY unsecured	claim:			
		r 1 and Debtor 2 only		Domestic support obligations				
		st one of the debtors a		☐ Taxes and certain other debts yo	u owe the government			
		k if this claim is for		Claims for death or personal injuintoxicated	ry while you were			
	Is the cla	im subject to offset	?	Other, Specify				
	Yes							
2.2	-cross-servings-servings-o	esteri (Vicentialiteriteria) esteriteri esteriteri esteriteri esteritari de titologia (esteritaria).	er fra er till det å ett melde å klatigt att kondegså sed e frå frike ett av flatta for fra entilla til en fræ		gjergopige tim sjungsvinner uningstyrer per het troute de tumin visser ter de			
	Priority Cre	ditor's Name		Last 4 digits of account number When was the debt incurred?		\$	. \$	_ \$
	Number	Street						
				As of the date you file, the claim  Contingent	is: Check an mat apply			
	City	S	state ZiP Code	Unliquidated				
	,	urred the debt? Chec		Disputed				
	Debto			Tune of DOLODITY	alaim.			
	Debto			Type of PRIORITY unsecured of Domestic support obligations	ciaim:			
		r 1 and Debtor 2 only		Taxes and certain other debts yo	u owe the government			
		st one of the debtors ar		Claims for death or personal inju	=			
	Chec	k if this claim is for	a community debt	intoxicated	, mino you wole			
	Is the cla	im subject to offset	?	Other. Specify				

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i usung any entries on this page, number the	m beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriori amount
Priority Creditor's Name	Last 4 digits of account number	\$	\$	_ \$
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply			
	Contingent	•		
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only				
Debtor 1 and Debtor 2 only	<ul> <li>Domestic support obligations</li> <li>Taxes and certain other debts you owe the government</li> </ul>			
At least one of the debtors and another	Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated  Other Specify			
Is the claim subject to offset?	— Onton Opport			
No No				
Yes				
			eritar timam engentaristatus turaturiania repe	ment i det til ett men en symme en symmeter ett se ett se ett se
Pnority Creditor's Name	Last 4 digits of account number	\$	\$	\$
lumber Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only				
Debtor 1 and Debtor 2 only	<ul> <li>Domestic support obligations</li> <li>Taxes and certain other debts you owe the government</li> </ul>			
At least one of the debtors and another	Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated Other. Specify			
the claim subject to offset?	Green Specify			
<b>)</b> No				
Yes	or the Control of the			
	Last 4 digits of account number	\$:	S	•
ionity Creditor's Name				<u> </u>
umber Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
ly State ZIP Code	Unliquidated			
ho incurred the debt? Check one.	Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	☐ Domestic support obligations			
Debtor 1 and Debtor 2 only At least one of the debtors and another	Taxes and certain other debts you owe the government			
	Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated  Other. Specify	monatenn eta foloeksii keelen ka ilmana ka ji eksylyi.	edengonileeraan oo	artist til stilladd og transcrivet typelligik og til seden sk
the claim subject to offset?				
No				

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Debtor 1

List All of Your NONPRIORITY Unsecured Claims Part 2:

3.	Do any creditors have nonpriority unsecured claims against No. You have nothing to report in this part. Submit this form to Yes	you? the court with your other schedules.	
4.	List all of your nonpriority unsecured claims in the alphabetic nonpriority unsecured claim, list the creditor separately for each clincluded in Part 1. If more than one creditor holds a particular claims fill out the Continuation Page of Part 2.		
<u></u>	<b></b>		Total claim
4.1	Nonpnority Creditor's Name	Last 4 digits of account number	
	Nonpnority Creditor's Name		3
	Number Street	When was the debt incurred?	
	City State 7/D Code		
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.	Contingent	
	Debtor 1 only	Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another		
	☐ Check if this claim is for a community debt	Student loans	
		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset? ☐ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
Γ	March of Advances of Confession (Confession of Confession		
4.2			Committee to the comment of the committee of the committe
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street	wake-	
		As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	☐ Unliquidated	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce	
	Is the claim subject to offset?	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	□ No	Other. Specify	
	T Yes		
4.3	The state of the s	and the second s	kerkunin menengang dinkkan yank kenani seman sanad dinka kalabas
	Nonpriority Creditor's Name	Last 4 digits of account number \$_	
		When was the debt incurred?	
	Number Street	-	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Tune of NONEDIODITY	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans	
		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	

Part 2:

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**MARCUS** 

Your NONPRIORITY Unsecured Claims - Continuation Page

Aft	er listing any entries on this page, n	umber the	em beginning with	4.4, followed by 4.5, and so forth.		Total claim
44	, Shkingreat Financial Si	ERVICE:	S	Last 4 digits of account number	mymanique trabalación derdicales arangement	\$_1,750.00
	Nonpriority Creditor's Name 7412 N WESTERN AVE			When was the debt incurred?	08/01/2005	
	Number Street CHICAGO	IL	60645	As of the date you file, the claim	is: Check all that apply.	
	Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a commuls the claim subject to offset?  ✓ No  Yes	State	ZIP Code	Contingent Unliquidated Disputed  Type of NONPRIORITY unsecur Student loans Obligations arising out of a sepa you did not report as priority clai Debts to pension or profit-sharin Other. Specify LOAN	ration agreement or divorce that ms	
44	BRIDGEVIEW BANK GROUP Nonpriority Creditor's Name	nitrianisti 1885. kilongani Selikabi An		Last 4 digits of account number		\$_2,500.00
	4753 N BROADWAY ST		M. *L.	When was the debt incurred?	12/01/2007	
	Number Street CHICAGO	IL	60640	As of the date you file, the claim	is: Check all that apply.	
	Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a commuls the claim subject to offset?  No Yes		ZIP Code	Contingent Unliquidated Disputed  Type of NONPRIORITY unsecur Student loans Obligations arising out of a separ you did not report as priority clair Debts to pension or profit-sharing Other. Specify LOAN	ration agreement or divorce that ms	
44	CHASE CARD	and the second seco	tte förhillt såridet læmer Adriantism i mödnumere davise avspæg	Last 4 digits of account number	8 4 0 7	\$_3,867.00
	Nonpriority Creditor's Name PO BOX 15298			When was the debt incurred?	05/01/2009	
	Number Street WILMINGTON	DE	19850	As of the date you file, the claim	is: Check all that apply.	
	Who incurred the debt? Check one.  ✓ Debtor 1 only  □ Debtor 2 only  □ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another	State	ZIP Code	Contingent Unliquidated Disputed  Type of NONPRIORITY unsecure Student loans		
	☐ Check if this claim is for a commuls the claim subject to offset?  ✓ No ☐ Yes	nity debt		Obligations arising out of a separ you did not report as priority clain  Debts to pension or profit-sharing  Other. Specify CREDIT CA	ns plans, and other similar debts	

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#### Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name		On which entry in Part 1 or Part 2 did you list the original creditor?
rvanie		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured Claims
		Last 4 digits of account number
City	State ZIP Code	
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured Claims
City	State ZIP Code	Last 4 digits of account number
		On which entry in Part 1 or Part 2 did you list the original creditor?
Name		
Number Street		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
THE PART OF THE PA		Part 2: Creditors with Nonpriority Unsecured Claims
City	State ZIP Code	Last 4 digits of account number
		On which entry in Part 1 or Part 2 did you list the original creditor?
Name		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured
		Claims
City	State ZIP Code	Last 4 digits of account number
		On which entry in Part 1 or Part 2 did you list the original creditor?
Name		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured
		Claims
City	State ZIP Code	Last 4 digits of account number
VIII. Vallet til 1900-sen til kans i ette til til sen til som sinner sen til til sen til sen til sen til sen kan til	CABITE LIFE COURT	On which entry in Part 1 or Part 2 did you list the original creditor?
Name		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured
		Claims
City	State ZiP Code	Last 4 digits of account number
ret folglick folgensker men mit met en trette tribber i tolste en med trette kreiten en betom betom betom en m		On which entry in Part 1 or Part 2 did you list the original creditor?
Name		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street		Part 2: Creditors with Nonpriority Unsecured
		Claims
City	State ZIP Code	Last 4 digits of account number

Case 16-20325 **MARCUS** 

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Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim	
Total claims	6а	. Domestic support obligations	6a.	\$	0.00
from Part 1	6b	. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d	. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0.00
	6e	. <b>Total.</b> Add lines 6a through 6d.	6e.	\$	0.00
				Total claim	
Total claims	6f.	Student loans	6f.	\$	0.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$	0.00

Case 16-20325 Doc 1 Filed 06/22/16 Entered 06/22/16 11:01:50 Desc Main Page 61 of 104 Document Fill in this information to identify your case: **MARCUS HUGHES** Debtor 1 First Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois Check if this is an (If known) amended filing Official Form 106F/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). **List All of Your PRIORITY Unsecured Claims** 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim **Priority** Nonpriority amount amount 2.1 Last 4 digits of account number \_\_\_\_\_ Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply Contingent ZIP Code Unliquidated Who incurred the debt? Check one Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were Is the claim subject to offset? intoxicated ☐ No Other, Specify\_ Yes Last 4 digits of account number \_\_\_\_ \$\_\_\_\$ \$\_\_\_\$ Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply Contingent ☐ Unliquidated ☐ Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only ■ Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were Check if this claim is for a community debt intoxicated Is the claim subject to offset? Other, Specify\_ ☐ No Yes

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Debtor 1	MARU

Part 1:	Your PRIORITY Unsecured Claims - Continuation Page

Aft	er listing any entries on this page, number then	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
		Lact 4 digite of account waster	\$	\$	\$
	Priority Creditor's Name	Last 4 digits of account number	Ψ	_ Ψ	Φ
	Number Street	When was the debt incurred?			
	Oliver Charles	As of the date you file, the claim is: Check all that apply.			
	7,777,110				
	City State ZIP Code	☐ Contingent☐ Unliquidated			
	Sign State Zir Code	Disputed			
	Who incurred the debt? Check one.				
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations			
	At least one of the debtors and another	Taxes and certain other debts you owe the government			
	☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
	to the eleim auticates afficien	Other. Specify			
	Is the claim subject to offset?				
	☐ Yes				
			milit komilimente et monte et e		Berketiniakkulanka mengepanangangan,
	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
	ordan straine	When was the debt incurred?			
	Number Street	when was the dept incurred?			
		As of the date you file, the claim is: Check all that apply.			
		☐ Contingent			
	City State ZIP Code	☐ Unliquidated			
	Who incurred the debt? Check one.	☐ Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only				
	☐ Debtor 1 and Debtor 2 only	Domestic support obligations     Taxes and certain other debts you owe the government.			
	At least one of the debtors and another	Taxes and certain other debts you owe the government Claims for death or personal injury while you were			
	☐ Check if this claim is for a community debt	intoxicated			
	•	Other Specify			
	Is the claim subject to offset?				
	☐ No ☐ Yes				
	1 ES	$\sqrt{\frac{1}{2}} \left( \frac{1}{2} \left( \frac{1}{2$	Se (MTT) che y 11949 ett. 1 (MATTINI, Le Illandia), (passany), et	and the second section of the sectio	unicing increases estatus simus productivativa (sec
	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
	Thong Creditors Marile	Miles was the data?			
	Number Street	When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply.			
		Contingent			
	City State ZIP Code	Unliquidated			
	Who incurred the debt? Check one.	☐ Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	Domestic support obligations			
	Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
	At least one of the debtors and another	Claims for death or personal injury while you were			
	☐ Check if this claim is for a community debt	intoxicated  Other, Specify	ennikumin ilan manantyy etyminyi ety aritikamin met nikumin ety ety ilan ilan ily ety	portunente emiliare no tropingo esta esta esta esta en 1 está en troba ten 12	delimente e l'accent de destinate en remança à part que l'a el million,
	ls the claim subject to offset?				
	□ No				
	Yes				

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Debtor 1

**MARCUS** 

Dogwoodnets

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Last Name

Part 2:	List All of Y	our NONPRI	ORITY Uns	secured C	laims
3. Do any	y creditors hav	e nonpriority (	unsecured o	laims agair	nst you?

	No. You have nothing to report in this part. Submit this f Yes	orm to the court with your other schedules.	
	nonpriority unsecured claim, list the creditor separately for e	abetical order of the creditor who holds each claim. If a creditor has each claim. For each claim listed, identify what type of claim it is. Do not	tist claims already
	included in Part 1. If more than one creditor holds a particular claims fill out the Continuation Page of Part 2.	ar claim, list the other creditors in Part 3.If you have more than three no	npriority unsecured
			Total claim
4.1		A SEA HANGE CO.	
<u> </u>	Nonpriority Creditor's Name	Last 4 digits of account number	\$
		When was the debt incurred?	
	Number Street		
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only	_	
	Debtor 1 and Debtor 2 only  At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		Student loans	
	Check if this claim is for a community debt	<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	□ No	Other. Specify	
	Yes		
4.2	$P(P(P(P(S(A))) \cap P(S(A)) \cap P(S(A))$	Last 4 digits of account number	i. Clair i. A. Clair i. e Claritis e Caroline i. in Caroline in Anno (anno (anno agus agus agus agus agus agus agus agus
L	Nonpriority Creditor's Name	When was the debt incurred?	~
		The state of the s	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code		
	Who increased the debta Object	☐ Contingent ☐ Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only Debtor 2 only		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce	
	•	that you did not report as priority claims	
	Is the claim subject to offset?	<ul> <li>□ Debts to pension or profit-sharing plans, and other similar debts</li> <li>□ Other. Specify</li> </ul>	
	☐ No ☐ Yes	Office: Specify	
	wall 100	(Treatment defined a material content of the cont	entisensen besonen skrivensa villender Audien sammer und und so sur mensen.
4.3		Last 4 digits of account number	•
	Nonpriority Creditor's Name	When was the debt incurred?	<u>ъ</u>
	Number Street		
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.	Contingent	
	Debtor 1 only	Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	••	
	Check if this claim is for a community debt	<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce</li></ul>	
	Is the claim subject to offset?	that you did not report as priority claims	
	□ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other Specify	
			the second control of the second control of the second

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Debtor 1

Pai	rt	2

Your NONPRIORITY Unsecured Claims — Continuation Page

r listing any entries on this pag	e, number th	em beginning witr	1 4.4, tollowed by 4.5, and so forth.	Total claim
TITLE MAX OF ILLINOIS,	INC		Last 4 digits of account number	<sub>\$</sub> 1,925.00
Nonpriority Creditor's Name 6126 W DEMPSTER STR	EET		When was the debt incurred? 04/29/2016	
Number Street MORTON GROVE	IL	60053	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check one			Unliquidated	
Debtor 1 only	;.		Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors and and	other		Obligations arising out of a separation agreement or divorce that	ŧ
☐ Check if this claim is for a cor	nmunity debt		you did not report as priority claims	
Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts  Other, Specify LOAN	
<b>⊠</b> No □ Yes			Stat. Specify 22 - X	
PLS FINANCIAL SOLUTION	NS OF ILI	INOIS, INC	Last 4 digits of account number	\$ <u>2,114.00</u>
Nonpriority Creditor's Name			When was the debt incurred? 04/30/2016	
800 JORIE BLVD, 2ND FL Number Street	OOR		- Viter was the dest meaned:	
OAK BROOK	IL	60523	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check one			Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors and and	other		Obligations arising out of a separation agreement or divorce tha	t
Check if this claim is for a con	munity debt		you did not report as priority claims	
s the claim subject to offset?	-		☐ Debts to pension or profit-sharing plans, and other similar debts  ☑ Other Specify LOAN	
√ No			other. Specify LOAN	
Yes				
ILLINOIS LENDING CORP	ORATION		Last 4 digits of account number	\$ <u>678.00</u>
Nonpriority Creditor's Name			When was the debt incurred? 05/14/2016	
2109 S WABASH AVENUE			When was the debt incurred?	
Number Street CHICAGO	IL	60616	As of the date you file, the claim is: Check all that apply.	
Dity	State	ZIP Code	☐ Contingent	
Mho incurred the 4-149 or - 4			Unfiquidated	
Who incurred the debt? Check one.			☐ Disputed	
Debtor 1 only Debtor 2 only			Tune of NONDDIODITY unangued eleier	
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
At least one of the debtors and ano	ther		<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>	
Check if this claim is for a com	munity daht		you did not report as priority claims	
	morney debt		Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?   Mo			Other. Specify LOAN	
<b>2</b> No ☐ Yes				

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**MARCUS** 

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Part 3:

List Others to Be Notified About a Debt That You Already Listed

Last Name

Name	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claim
	Last 4 digits of account number
ity State ZIP Code	
ame	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
umber Street	Part 2: Creditors with Nonpriority Unsecured Claims
ity State ZIP Code	Last 4 digits of account number
	On which entry in Part 1 or Part 2 did you list the original creditor?
ame	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
lumber Street	Part 2: Creditors with Nonpriority Unsecured Claims
Sity State ZIP Code	Last 4 digits of account number
City State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
lame	
lumber Street	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured
	Claims
ity State ZIP Code	Last 4 digits of account number
sy State 21 Cook	On which entry in Part 1 or Part 2 did you list the original creditor?
ame	
umber Street	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
	Part 2: Creditors with Nonpriority Unsecured Claims
Sity State ZIP Code	Last 4 digits of account number
ity State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
lame	
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured
	Claims
city State ZIP Code	Last 4 digits of account number
	On which entry in Part 1 or Part 2 did you list the original creditor?
lame	
umber Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured
	→ Fait Z. Creditors with Nonphorny Unisecured

State

ZIP Code

Last 4 digits of account number \_\_\_\_\_

Part 4:

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Debtor 1

**MARCUS** 

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim	
Total claims	6a	Domestic support obligations	6a.	\$	0.00
from Part 1	6b	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+_\$	0.00
	6e	Total. Add lines 6a through 6d.	6e.	\$	0.00
				Total claim	
Total claims	6f.	Student loans	6f.	Total claim	0.00
Total claims from Part 2		Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.	**Total claim**  ***	0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority		**************************************	***************************************
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other	6g.	\$s	0.00

Case 16-20325 Doc 1 Filed 06/22/16 Entered 06/22/16 11:01:50 Desc Main Document Page 67 of 104 Fill in this information to identify your case: **MARCUS** HUGHES Debtor 1 Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name United States Bankruptcy Court for the: Northern District of Illinois ☑ Check if this is an amended filing (If known) Official Form 106F/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Priority Nonpriority amount amount 2.1 Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply Contingent ZIP Code ☐ Unfiguidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ■ Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were intoxicated is the claim subject to offset? No No Other Specify Yes Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply Contingent Unliquidated ZIP Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were Check if this claim is for a community debt intoxicated Other, Specify is the claim subject to offset? ☐ No Yes

Official Form 106E/F

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Debtor 1

**MARCUS** 

Last Name

er listing any entries on this page, number ther	m beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriori amount
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
Chorty of editor a realite	Wilhow was the debt increased?			
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	Unliquidated			
5,400	Disputed			
Who incurred the debt? Check one.	,			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	☐ Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated			
	Other, Specify			
Is the claim subject to offset?				
□ No				
Yes				
Priority Creditor's Name	Last 4 digits of account number	\$	. \$	. \$
	When was the debt incurred?			
Number Street	MANA MANA MANA MANA MANA MANA MANA MANA			
	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	☐ Unliquidated			
	Disputed			
Who incurred the debt? Check one.				
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only Debtor 1 and Debtor 2 only	☐ Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government			
	☐ Claims for death or personal injury while you were intoxicated			
Check if this claim is for a community debt	Other. Specify			
Is the claim subject to offset?				
□ No				
Yes				
ON THE BOTH OF THE PROPERTY OF THE PROPERTY AND AN APPROXIMATION OF THE PROPERTY OF THE PROPER	n n n n n n n n n n n n n n n n n n n	en eller eft og en en en en fyr eller eller eller eller eller eller eller eller fyr eller eller fyr eller elle En eller	e transcriptura de la companya de la	ekanisasi kasaan Soomisan (pingan pingan)
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name				
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
City State ZIP Code	Contingent			
Oily State Zir Code	☐ Unliquidated☐ Disputed			
Who incurred the debt? Check one.				
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated  Other. Specify	**************************************	de werde e er de gewild is filmely mely englesjoned de moldelige de	de antice e hacitum peragramme procumer y majorizi
is the claim subject to offset?				
□ No				
□ Yes				

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3. Do any creditors have nonpriority unsecured claims again		
No. You have nothing to report in this good. Submit this form	ist you?	
<ul><li>No. You have nothing to report in this part. Submit this form</li><li>✓ Yes</li></ul>	n to the court with your other schedules.	
	etical order of the creditor who holds each claim. If a creditor has more than the claim. For each claim listed, identify what type of claim it is. Do not list claims claim, list the other creditors in Part 3.If you have more than three nonpriority ur	
٦	Total cla	aim
Nonpriority Creditor's Name	Last 4 digits of account number	
, and the state of	When was the debt incurred?	
Number Street		
City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	☐ Contingent	
Who incurred the debt? Check one.	Unliquidated	
Debtor 1 only	Disputed	
Debtor 2 only		
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Student loans	
Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce	
Is the claim subject to offset?	that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
☐ No	Other. Specify	
☐ Yes	- Chief Chief	
	THAN CHICAGO AND AND THE CHICAGO AND	****
Nonpriority Creditor's Name	Last 4 digits of account number \$	
Nonpholity Creditor's Name	When was the debt incurred?	
Number Street		
	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	Unliquidated	
Debtor 1 only	Disputed	
Debtor 2 only	·	
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce	
	that you did not report as priority claims	
Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
TOS  TOSTICOS (STATES) (STATES		Post of Facility Comments
Nonpriority Creditor's Name	Last 4 digits of account number	
samphonity Creditor's Name	When was the debt incurred?	······
Number Street		
City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check one.	Contingent	
Debtor 1 only	☐ Unliquidated	
Debtor 1 only Debtor 2 only	☐ Disputed	
Debtor 1 and Debtor 2 only	·	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Student loans	
Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce	
Is the claim subject to offset?	that you did not report as priority claims	
□ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other Specify	

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MARCUS

Part 2:	Your NONPRIORITY	Unsecured	Claims -	Continuation	Page

	er listing any entries on this p	age, number the	em beginning with	n 4.4, followed by 4.5, and so forth.	To	otal claim
4	GRAND CANYON UNIV	/ERSITY		Last 4 digits of account number	\$	300.00
	Nonpriority Creditor's Name 3300 W CAMELBACK ROAD			When was the debt incurred? 05/02/2013		
	Number Street PHOENIX	AZ	85017	As of the date you file, the claim is: Check all that apply.		
	City  Who incurred the debt? Check  Debtor 1 only	State one.	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed		
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and	another		Type of <b>NONPRIORITY</b> unsecured claim:		
	☐ Check if this claim is for a distribution is claim subject to offset?  ✓ No ☐ Yes			<ul> <li>□ Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>□ Debts to pension or profit-sharing plans, and other similar debts</li> <li>☑ Other. Specify LOAN</li> </ul>		
4₽	PENDRICK CAPITAL PA	ARTNERS	ikk matalah di Gamuse innuer di mara ra mana sa mana sa mana na panjan i	Last 4 digits of account number	**************************************	514.00
	625 US-1 Number Street			<u></u>		
	KEY WEST	FL State	33040 ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent		
	Who incurred the debt? Check of Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and □ Check if this claim is for a contract of the debtor and the debtor of	another		<ul> <li>☐ Unliquidated</li> <li>☐ Disputed</li> <li>Type of NONPRIORITY unsecured claim:</li> <li>☐ Student loans</li> <li>☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>☐ Debts to pension or profit-sharing plans, and other similar debts</li> </ul>		
42	Is the claim subject to offset?  No Yes	Status Senti Sentatus salah salah selah		Other. Specify		disk and dilam orbitals as most disk.
411	STAPLES CREDIT CAR Nonpriority Creditor's Name	D		Last 4 digits of account number 6 1 2 2	\$	,200.00
	PO BOX 78004			When was the debt incurred? 06/20/2013		
	Number Street PHOENIX	AZ	85062	As of the date you file, the claim is: Check all that apply.		
	Who incurred the debt? Check o	State	ZIP Code	Contingent Unliquidated Disputed		
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and a			Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that		
	☐ Check if this claim is for a c Is the claim subject to offset? ☑ No ☐ Yes	ommunity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify <u>CREDIT CARD</u>		

MARCUS

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Part 3:

Last Name

### List Others to Be Notified About a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.				
Name	On which entry in Part 1 or Part 2 did you list the original creditor?			
Name	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claim			

				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claim
				Last 4 digits of account number
City		State	ZIP Code	
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
City	an and an an ann an	State	ZIP Code	Last 4 digits of account number
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
rading.				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
Cit		Colo	ZiP Code	Last 4 digits of account number
City		State	ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
City		State	ZIP Code	Last 4 digits of account number
N				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
************				Last 4 digits of account number
City	tharman hadraliman mendikan kololisin han stadan harmalis ( ) odami kesahi nah	State	ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street			☐ Part 2: Creditors with Nonpriority Unsecured
****				Claims
City		State	ZIP Code	Last 4 digits of account number
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
		·		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
-		0:-1:	710 0 - 1-	Last 4 digits of account number
City		State	ZIP Code	

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Debtor 1

Part 4:

### Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim
Total claims	6a. Domestic support obligations	6a.	\$0.00
from Part 1	6b. Taxes and certain other debts you owe the government		\$0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00
	6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	+ \$ 0.00
	6e. <b>Total.</b> Add lines 6a through 6d.	6e.	\$ 0.00
			Total claim
Total claims from Part 2	6f. Student loans	6f.	s0.00_
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00
	6i. <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$ 0.00
	6j. <b>Total.</b> Add lines 6f through 6i.	6j.	s0.00

Entered 06/22/16 11:01:50 Desc Main Case 16-20325 Doc 1 Filed 06/22/16 Page 73 of 104 Document Fill in this information to identify your case: MARCUS Debtor 1 **HUGHES** First Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name United States Bankruptcy Court for the: Northern District of Illinois Check if this is an (If known) amended filing Official Form 106F/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☑ Yes. 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim **Priority** Nonpriority amount amount Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply Contingent Unliquidated Who incurred the debt? Check one Disputed Debtor 1 only Debtor 2 only Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government Check if this claim is for a community debt Claims for death or personal injury while you were Is the claim subject to offset? intoxicated ☐ No Other, Specify Yes Last 4 digits of account number \_\_\_ \$\_\_\_\_\$ <u>\_\_\_\_</u>\$\_\_\_\_\$ Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply Contingent ZIP Code ☐ Unliquidated ☐ Disputed Who incurred the debt? Check one. Debtor 1 only

Official Form 106E/F

No Yes

Debtor 2 only

Debtor 1 and Debtor 2 only

is the claim subject to offset?

At least one of the debtors and another

Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

Taxes and certain other debts you owe the government

Claims for death or personal injury while you were

Domestic support obligations

Other, Specify

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Debtor 1

Dogwoodenets

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Part 1: Your PRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. Total claim **Priority** Nonpriority amount amount Last 4 digits of account number \_\_\_\_ Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated Check if this claim is for a community debt Other. Specify Is the claim subject to offset? No No Yes Last 4 digits of account number \_\_\_\_ \_\_\_ Priority Creditor's Name When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. □ Contingent Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated ☐ Check if this claim is for a community debt Other, Specify Is the claim subject to offset? ☐ No Yes Last 4 digits of account number Priority Creditor's Name When was the debt incurred? Number As of the date you file, the claim is: Check all that apply Contingent ZIP Code Unliquidated Disputed Who incurred the debt? Check one. Debtor 1 only Type of PRIORITY unsecured claim: Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only ☐ Taxes and certain other debts you owe the government At least one of the debtors and another ☐ Claims for death or personal injury while you were intoxicated Check if this claim is for a community debt Other, Specify\_

No No ☐ Yes

Is the claim subject to offset?

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**MARCUS** 

Middle Name

Debtor 1

Part 2:	List All of	Your NONPRIORITY	/ Unsecured	Claim
المكاللية	FIST WILDS	TOUT HOUSENION IT	unsecured	Claim

3. Do any creditors have nonpriority unsecured claims against you?

		n to the court with your other schedules.	
	nonpriority unsecured claim, list the creditor separately for each	etical order of the creditor who holds each claim. If a creditor has h claim. For each claim listed, identify what type of claim it is. Do not claim, list the other creditors in Part 3.If you have more than three no	list claims already
_	1		Total claim
4.1		Last 4 digits of account number	
	Nonpriority Creditor's Name	When was the debt incurred?	\$
	Number Street		
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	<b></b>	☐ Contingent	
	Who incurred the debt? Check one.	Unliquidated	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only	Time of MONDOIODITY	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		Student loans	
	Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	□ No	Other. Specify	
	Yes		
4.2		Last 4 digits of account number	s in the designation of the second se
L	Nonpriority Creditor's Name	When was the debt incurred?	<u> </u>
	Number Street	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code		
		Contingent	
	Who incurred the debt? Check one.	Unliquidated Disputed	
	Debtor 1 only	Circle Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
		Obligations arising out of a separation agreement or divorce	
	☐ Check if this claim is for a community debt	that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	
			gangan oo
4.3		Last 4 digits of account number	•
	Nonpriority Creditor's Name	When was the debt incurred?	\$
	Number Street	The state of the s	
	Number Sireet		
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	Unliquidated	
	Debtor 2 only	Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	• •	
	☐ Check if this claim is for a community debt	Student loans	
	·	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	

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Debtor 1

MARCUS

Last Name

Part 2:	Your NONPRIORITY Unsecured Claims — Continuation Page
Part 2:	Your NONPRIORITY Unsecured Claims — Continuation Page

Middle Name

			h 4.4, followed by 4.5, and so forth.		tal cłaim
MIDWEST IMGAGING I	PROFESSION	NALS	Last 4 digits of account number	\$	515.00
903 COMMERCE DR, S	SUITE 333		When was the debt incurred? 11/17/2015		
Number Street OAK BROOK	IL	60523	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
Who incurred the debt? Check	000		Unliquidated		
Debtor 1 only	one.		☐ Disputed		
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only			Student loans		
At least one of the debtors and	another		Obligations arising out of a separation agreement or divorce that		
Check if this claim is for a	community debt		you did not report as priority claims		
Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debts		
No Pes			Other Specify MEDICAL		
T-MOBILE	er-vin et hand der de tellemente de de de l'altra de la describation de la maission de la maissi	a Distribution of Contract and a second of the second action of Contract and an advantage of the second action of Contract and an advantage of the second action of Contract and action of Contract and	Last 4 digits of account number	s	942.00
Nonpriority Creditor's Name			When was the debt incurred? 08/23/2014		
PO BOX 37380			When was the debt incurred? U8/23/2014		
Number Street ALBUQUERQUE	NM	87176	As of the date you file, the claim is: Check all that apply.		
ALDOQUENQUE	State	ZIP Code	Contingent		
			☐ Unliquidated		
Vho incurred the debt? Check	one.		☐ Disputed		
Debtor 1 only					
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
At least one of the debtors and	another		Student loans		
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
Check if this claim is for a c	community debt		Debts to pension or profit-sharing plans, and other similar debts		
s the claim subject to offset?			Other. Specify UTILITY		
No No					
Yes					
A THE STATE OF THE	karra, ar til der til se te en til ser te en skild skarr til att av den til se til se til se til se til se til	with the second	(1944-1941-1944-1944-1944-1944-1944-1944	• 3	,615.00
ALLSTATE INSURANCE	E/STEVEN GI	ERTLER	Last 4 digits of account number 7 7 4 4	Ψ	
Nonpriority Creditor's Name		***************************************			
110 W GRAND			Tyrien was the debt incurred?		
Number Street CHICAGO	IL	60654	As of the date you file, the claim is: Check all that apply.		
CHICAGO	I L. State	ZIP Code	Contingent		
			Unliquidated		
Who incurred the debt? Check	one.		☑ Disputed		
Debtor 1 only					
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only  At least one of the debtors and	another		Student loans		
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
Check if this claim is for a c	ommunity debt		Debts to pension or profit-sharing plans, and other similar debts		
s the claim subject to offset?			Other. Specify COURT CASE		
<b>∡</b> No					
,,,,					

Debtor 1

Part 3:

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**MARCUS** 

Last Name

#### List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

		On which entry in Part 1 or Part 2 did you list the original creditor?
Name		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street	Part 2: Creditors with Nonpriority Unsecured Claims
		Last 4 digits of account number
City	State ZIP Code	
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street	Part 2: Creditors with Nonpriority Unsecured Claims
City	State ZIP Code	Last 4 digits of account number
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
Name		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street	Part 2: Creditors with Nonpriority Unsecured Claims
		Last 4 digits of account number
City	State ZIP Code	
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
Number	Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
THEIRIDE	Section	Part 2: Creditors with Nonpriority Unsecured Claims
	State Z!P Code	Last 4 digits of account number
City	State ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name		
Number	Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured
		Claims
City	State ZIP Code	Last 4 digits of account number
Otty	Linux rand preserven, in whister order it a random princer ( and random representative order order it is presented in the contract of the contract of the contract order	On which entry in Part 1 or Part 2 did you list the original creditor?
Name		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street	Part 2: Creditors with Nonpriority Unsecured
***************************************		Claims
City	State ZIP Code	Last 4 digits of account number
Name		On which entry in Part 1 or Part 2 did you list the original creditor?
NIL		Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number	Street	Part 2: Creditors with Nonpriority Unsecured Claims
City	State ZIP Code	Last 4 digits of account number

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Debtor 1

**MARCUS** 

Last Name

Part 4:

#### Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims	6a. Domestic support obligations	6a.	\$	0.00
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	† \$	0.00
	6e. <b>Total</b> . Add lines 6a through 6d.	6e.	\$	0.00
			Total claim	
Total claims	6f. Student loans	6f.	\$	0.00
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	<ol> <li>Other. Add all other nonpriority unsecured claims. Write that amount here.</li> </ol>	<b>6</b> i.	+ \$	0.00
	6j. <b>Total.</b> Add lines 6f through 6i.	6j.	\$	0.00

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Fill in	this in	formation to id	entify your	Case.			
		MARCUS	ientity you.	cass.	HUGHES		
Debtor	· -	First Name	N	iddle Name	Last Name		
Debtor (Spouse		First Name	M	iddle Name	Last Name		
United	States B	ankruptcy Court f	for the: North	ern District of Illino	ois		
Case n							☐ Check if this is an
	,						amended filing
O.(.)	. ,	400	_				
****		orm 106					
Sch	edu	ile G: E	xecut	ory Cont	racts and	d Unexpired Leases	12/15
informa addition	ition. If nal pag	more space is es, write your	needed, co name and o	te. If two married opy the additiona ase number (if ki	l page, fill it out, r nown).	ogether, both are equally responsible for supp number the entries, and attach it to this page. O	lying correct n the top of any
	No. Ch	eck this box an	d file this fo	rm with the court v	vith your other sche	edules. You have nothing else to report on this form re listed on Schedule A/B: Property (Official Form	n. 106A/B).
2. List exa	t separ	ately each pers rent, vehicle le	son or com	pany with whom	vou have the con	tract or lease. Then state what each contract or m in the instruction booklet for more examples of e	lease is for (for
Per	son or	company with	whom you	have the contrac	ct or lease	State what the contract or lease is for	•
<sup>2.1</sup> HE	EARTI	AND REAL	ESTATE	PROPERTIES	<b>S</b>	RENTAL LEASE FOR APARTMENT	
Nan	ne					_ RENTAL LEASE FOR APARTMENT	
Nun	nber	NE STREET Street		· · · · · · · · · · · · · · · · · · ·		_	
GL City	LENVI	EW	IL State	60025 ZIP Code		_	
2.2 TO				* * * * * * * * * * * * * * * * * * * *	e e e	ere en	
Nan		A FINANCIA	LSERVIC	ES	W-MMM	_ LEASE FOR VEHICLE	
***************************************	BOX	9490 Street				_	
CE	DAR	RAPIDS	IA	52409		_	
City 2.3		Mark the second	State	ZIP Code			terreture terreture anno per terreture de la companya de la companya de la companya de la companya de la compa
Nam	ne	***************************************				_	
Num	ıber	Street				_	
City			State	ZIP Code	· · · · · · · · · · · · · · · · · · ·	<u></u>	
2.4						_	
Nam	ne					_	
Num	iber	Street				-	
City			State	ZIP Code		-	
2.5			• • •	* **			
Nam	e			·····		-	
Num	ber	Street			444	-	
City			State	ZIP Code		-	

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Document

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Debtor 1

**MARCUS** 

HUGHES

Case number (/fknown)	-

Debtor i	First Name	Middle Name
1 1 10	Addisions	l Down if You

### Additional Page if You Have More Contracts or Leases

Last Name

Pe	erson or	company w	ith whom you	have the contract or lease	What the contract or lease is for
2 <u>2</u>	ame				<del></del>
			****		_
Nι	umber	Street			
Cit	ty		State	ZIP Code	•
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	ame				under
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				710 0 - 4 -	_
Cit	ty		State	ZIP Code	
≟					_
Na	ame				
Νι	umber	Street			
Cit	ty		State	ZIP Code	<del>-</del>
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Cit	ty		State	ZIP Code	_
2				and the second of the second o	
	ame				····
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2					
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Cit	ty	***************************************	State	ZIP Code	
2					
	ame	are the control of th			
N <sub>1</sub>	ımber	Street			
					_
Cit	ty		State	ZIP Code	

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Fill	in this i	nformation to ide	entify your case:					
Debt	har 1	MARCUS		HUGHES				
Debt	.01 1	First Name	Middle Name	Last Name	Wild Address of the Control of the C			
Debt (Spou		) First Name	Middle Name	Last Name	***************************************			
Unite	ed States	Bankruptcy Court fo	or the: Northern District of	Illinois				
Case	e number							
	own)				**************************************		Check if this i	s an
							amended filin	g
Offi	icial l	Form 106H	+					
Sc	hed	ule H: Yo	our Codebto	rs			12 <i>i</i> *	5
are fill and n case i	ing tog: umber in number oo you h in No in Yes Vithin th Arizona, in Yes. in Yes. in Yes. in Yes. in Yes. in Yes.	ether, both are eithe entries in the (if known). Answer any codebtone last 8 years, h California, Idaho, Go to line 3. Did your spouse, lofes. In which commerce in the eight of the eight	qually responsible for set boxes on the left. Attacker every question.  ors? (If you are filing a join lave you lived in a communication.)  Louisiana, Nevada, New former spouse, or legal e	upplying correct inf the Additional Pa  nt case, do not list eit  nunity property state Mexico, Puerto Rico  quivalent live with yo	ormation. If ge to this p her spouse or territor, Texas, Was u at the time	f more space age. On the as a codebt y? (Commu shington, ar	nity property states and territories include	ut.
						<del></del>		
	(	City	State		ZIP Code			
s S S	hown in Schedul Schedul	n line 2 again as e D (Official Forn e E/F, or Schedu	a codebtor only if that p n 106D), <i>Schedule E/F</i> (( le G to fill out Column 2	erson is a guaranto Official Form 106E/F	r or cosign	er. Make si lule G (Offic	pouse is filing with you. List the person ure you have listed the creditor on cial Form 106G). Use Schedule D,	
	Column	1: Your codebto	r				lumn 2: The creditor to whom you owe the del	ot
21						Cr	neck all schedules that apply:	
3.1	Name						Schedule D, line	
	Hairic						Schedule E/F, line	
	Number	Street					Schedule G, line	
	City		State		ZIP Code	<del></del>		
3.2								
ليسسا	Name						Schedule D, line	
	Number	Street					Schedule E/F, line	
							Schedule G, line	
3.3	City	· · · · · · · · · · · · · · · · · · ·	State		ZIP Code			
لت	Name			**************************************	····		Schedule D, line	
							Schedule E/F, line	
	Number	Street					Schedule G, line	
	City		State		ZID Code			

Document

Last Name

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Debtor 1

**MARCUS** 

Middle Name

HUGHES

Case number (if known)\_\_

Street	State	ZIP Code	Check all schedules that apply:  Schedule D, line  Schedule E/F, line  Schedule G, line
Street	State	ZIP Code	☐ Schedule E/F, line
Street	State	ZIP Code	
Street	State	ZIP Code	Schedule G, line
	State	ZIP Code	
			hadani
			Schedule D, line
			Schedule E/F, line
			Schedule G, line
Street			
	State	ZIP Code	
			Schedule D, line
			☐ Schedule E/F, line
Street		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Schedule G, line
	Stale	ZIP Code	_
	<b>3.3</b>		
			Schedule D, line
			Schedule E/F, line
Street			Schedule G, line
	State	ZIP Code	_
			Schedule D, line
			☐ Schedule E/F, line
Street			Schedule G, line
	State	ZIP Code	-mone
			Schedule D, line
			Schedule E/F, line
Street			Schedule G, line
	State	ZIP Code	
			Schedule D, line
			☐ Schedule E/F, line
Street			Schedule G, line
	Stala	7IP Code	altune
	State	£ii Ooce	
			Schedule D, line
			Schedule E/F, line
Street		4.44	Schedule G, line
	State	ZIP Code	
	Street Street Street	Street  State  State  State  State  State  State  Street  Street	Street  State ZIP Code  State ZIP Code  Street  State ZIP Code  Street  State ZIP Code  Street  State ZIP Code

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Fill in this in	formation to identify	your case:		`			
Debtor 1	MARCUS		HUGHES				
Debtor 2	First Name	Middle Name	Last Name				
(Spouse, if filing)		Middle Name	Last Name				
	Bankruptcy Court for the:	Northern District of Illinois					
Case number (If known)					Check if t	his is: ended filing	
						•	stpetition chapter 13
Official Fo	rm 1061				incom	e as of the following	date:
_		ır Income			MM / E	DD / YYYY	
							12/15
supplying cor If you are sepa separate shee	rect information. If ye arated and your spot	essible. If two married pe ou are married and not fi use is not filing with you, top of any additional pa ment	ling jointly, and ye do not include in	our spouse is formation abo	living with y	ou, include informatuse. If more space is	ion about your spouse. needed, attach a
Fill in your information			Debtor 1			Debtor 2 or non	-filing spouse
attach a se	more than one job, parate page with about additional	Employment status	☐ Employed ☑ Not employ	yed	AMERICANI AND	☐ Employed ☐ Not employed	MENDENNEN FRANKEN BER BESCHE STEELEN BESCHE STEELE BESCHE STEELE BESCHE STEELE BESCHE STEELE BESCHE STEELE BESCHE STEELE BESCHE
Include part self-employ	t-time, seasonal, or ed work.						
	may include student ker, if it applies.	Occupation		######################################		Andrews	
		Employer's name				A-10-10-10-10-10-10-10-10-10-10-10-10-10-	
		Employer's address			***		
			Number Street		****	Number Street	
			***************************************				
			City	State ZIP (	Code	City	State ZIP Code
		How long employed the	re?	_		-	
Part 2: 0	ive Details About	Monthly Income					
Estimate m	onthly income as of ss you are separated.	the date you file this for	n. If you have noth	ing to report fo	r any line, wr	ite \$0 in the space. Ind	clude your non-filing
If you or you	r non-filing spouse ha	ve more than one employe tach a separate sheet to th	er, combine the info	ormation for all	employers fo	or that person on the li	nes
				For	Debtor 1	For Debtor 2 or non-filing spouse	
List month deductions	ily gross wages, sala ). If not paid monthly,	iry, and commissions (be calculate what the monthly	efore all payroll wage would be.	2. <b>\$</b>	0.00	\$	ana.
3. Estimate a	nd list monthly over	time pay.		3. +\$	0.00	+ \$	
4. Calculate (	gross income. Add fir	ne 2 + line 3.		4. \$	0.00	\$	

Case 16-20325 Doc 1 Filed 06/22/16 Entered 06/22/16 11:01:50 Desc Main Page 84 of 104 Document **HUGHES MARCUS** Debtor 1 Case number (# known) First Name Middle Name For Debtor 1 For Debtor 2 or non-filing spouse 0.00 Copy line 4 here..... 5. List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. 0.00 0.00 5b. Mandatory contributions for retirement plans 5b. 0.00 5c. Voluntary contributions for retirement plans 5c. 0.00 5d. Required repayments of retirement fund loans 5d 0.00 5e. Insurance 5e. 0.00 5f. Domestic support obligations 5f. 0.00 5g. 5g. Union dues 0.00 5h. 5h. Other deductions. Specify: \_\_ 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. 0.00 6. 0.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total 0.00 monthly net income. 8a. 0.00 8b. Interest and dividends 8b. 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce 0.00 settlement, and property settlement. 8c. 0.00 8d. Unemployment compensation 8d. 8e. Social Security 8e. 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 0.00 8f. Specify: 0.00 8g. Pension or retirement income 8g. 8h. Other monthly income. Specify: \_ 8h. 0.00 Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 0.00 9. 10. 11.

			I								
0.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	(	0.00	+[	\$		]=	\$	0.00
1.	State all other regular contributions to the expenses that you list in Schedu	ule J	•								
	Include contributions from an unmarried partner, members of your household, you friends or relatives.	our de	epender	nts, yo	our roo	mm	ates, and other				
	Do not include any amounts already included in lines 2-10 or amounts that are no	not av	ailable t	to pay	expe	nses	s listed in <i>Sche</i> d	dule J.			
	Specify:							11.	+	\$	0.00
	Add the amount in the last column of line 10 to the amount in line 11. The re Write that amount on the Summary of Your Assets and Liabilities and Certain Sta						-	12.		\$	0.00
		?								Combined monthly is	-
13	B. Do you expect an increase or decrease within the year after you file this for   No.	) MI ?									
	Yes. Explain:						<u> </u>				
	Tes. Explain.										

12.

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Fill in this	information to identif	y your case:			
Debtor 1	MARCUS	HUGHES	2.		
Debtor 2	First Name	Middle Name Last Name	Check if thi		
	ng) First Name	Middle Name Last Name	An ame	•	
United State	es Bankruptcy Court for the	Northern District of Illinois		ement showing pos es as of the followir	stpetition chapter 13 ag
Case number (If known)	er		MM / DD		
	Form 106J	<del></del>			
<u>Sche</u>	dule J: Yo	ur Expenses			12/15
information	lete and accurate as p . If more space is need Answer every question	ossible. If two married people are fili ded, attach another sheet to this form n.	ing together, both are equally re n. On the top of any additional p	sponsible for suppl ages, write your nam	ying correct ne and case number
Part 1:	Describe Your Ho	usehold			
1. Is this a j	oint case?				
	Go to line 2. Goes Debtor 2 live in a	separate household?			
	☑ No				
	Yes. Debtor 2 must fi	le Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		
	ave dependents?	₩ No	Dependent's relationship to	Dependent's	Does dependent live
Do not list Debtor 2.	Debtor 1 and	Yes. Fill out this information for each dependent	Debtor 1 or Debtor 2	age agentiment of the second o	with you?
Do not sta	te the dependents'			AND ADDRESS OF THE PARTY OF THE	☐ No ☐ Yes
					□ No
				4	☐ Yes
					☐ No
					Yes
				-	☐ No ☐ Yes
					☐ No
					Yes
expenses	xpenses include of people other than nd your dependents?	☑ No ☐ Yes			
Part 2:	stimate Your Ongo	ing Monthly Expenses			
	<del></del>		na volum 4h in forma and a single		
expenses as applicable d	of a date after the bar	r bankruptcy filing date unless you a nkruptcy is filed. If this is a suppleme	re using this form as a supplemental <i>Schedule J</i> , check the box	at the top of the for	n and fill in the
		n-cash government assistance if you			
		d it on Schedule I: Your Income (Office	•	Your expe	nses
	I or home ownership e or the ground or lot.	expenses for your residence. Include	first mortgage payments and	4. \$	1,130.00
	luded in line 4:				
	estate taxes			4a. \$	0.00
	erty, homeowner's, or re			4b. \$	0.00
	e maintenance, repair, a			4c. \$	0.00
4d. Hom	eowner's association or	condominium dues		4d. \$	0.00

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Debtor 1

**MARCUS** HUGHES Case number (if known)\_

		Your exp	penses
5. Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
	J.		
6. Utilities: 6a. Electricity, heat, natural gas	6a.	\$	149.00
	6b.	\$	^ ^^
		\$	
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.		0.00
6d. Other. Specify:	6d.	\$	550.00
7. Food and housekeeping supplies	7.	\$	0.00
8. Childcare and children's education costs	8.	\$	60 00
9. Clothing, laundry, and dry cleaning	9.	\$	30.00
10. Personal care products and services	10.	\$	
11. Medical and dental expenses	11.	\$	0.00
<ol> <li>Transportation. Include gas, maintenance, bus or train fare.</li> <li>Do not include car payments.</li> </ol>	12.	\$	120.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14. Charitable contributions and religious donations	14.	\$	0.00
<ul><li>15. Insurance.</li><li>Do not include insurance deducted from your pay or included in lines 4 or 20.</li></ul>			
15a. Life insurance	15a.	\$	0.00
15b. Health insurance	15b.	\$	0.00
15c. Vehicle insurance	15c.	\$	177.00
15d. Other insurance. Specify:	15d.	\$	0.00
16. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$	0.00
17. Installment or lease payments:			
17a. Car payments for Vehicle 1	17a.	\$	408.00
17b. Car payments for Vehicle 2	17b.	\$	
17c. Other. Specify:	17c.	\$	
17d. Other. Specify:	17d.	\$	
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	\$	0.00
19. Other payments you make to support others who do not live with you.			
Specify:	19.	\$	0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	ne.		
20a. Mortgages on other property	20a.	\$	0.00
20b. Real estate taxes	20b.	\$	0.00
20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e. Homeowner's association or condominium dues	20e.	\$	0.00

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Debtor 1 MARCUS HUGHES  First Name Middle Name Last Name  Case of	number (if known)	
21. Other. Specify:	21. <b>+</b> \$	0.00
22. Calculate your monthly expenses.		• •
22a. Add lines 4 through 21.	22a <b>\$</b> _	2,917.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b. <b>\$</b>	0.00
22c. Add line 22a and 22b. The result is your monthly expenses.	22c. \$	2,917.00
	·	
23. Calculate your monthly net income.	_	0.00
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	0.00
23b. Copy your monthly expenses from line 22c above.	23b. <b>_</b> \$_	2,917.00
23c. Subtract your monthly expenses from your monthly income.	s	-2,917.00
The result is your monthly net income.	23c	
24. Do you expect an increase or decrease in your expenses within the year after you file this		
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage.		
☑ No.		
☐ Yes. Explain here: I CURRENTLY AM UNEMPLOYED AND AM LOOKING	G FOR A FULL TIM	E POSITION

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Fill in this information to identify your case:				
Debtor 1	MARCUS First Name	Middle Name	HUGHES Last Name	
Debtor 2 (Spouse, if filing	i) First Name	Middle Name	Last Name	
United States	Bankruptcy Court for th	e: Northern District of	Illinois	
Case number	(If known)			

### Official Form 106Sum

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for information. Fill out all of your schedules first; then complete the information on this form. If you are filing amende our original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.	
Part 1: Summarize Your Assets	
	Your assets Value of what you own
. Schedule A/B: Property (Official Form 106A/B)	s 0.00
1a. Copy line 55, Total real estate, from Schedule A/B	\$
1ь. Copy line 62, Total personal property, from Schedule A/В	\$633.00
1c. Copy line 63, Total of all property on Schedule A/B	\$ 633.00
art 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$0.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$ 8,119.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ 272,500.00
Your total liabilities	\$ 280,619.00
art 3: Summarize Your Income and Expenses	
Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I	\$0.00
Schedule J: Your Expenses (Official Form 106J)	s 2.917.00

in

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**HUGHES** 

Debtor			Last Name	HUGHES	Case number (if known)	
	First Name	Middle Name	rasi Name			
Part 4	Answer Th	ese Question	s for Administ	rative and Statisti	cal Records	
6. Are	you filing for ba	nkruptcy unde	Chapters 7, 11	or 13?		
_	No. You have not Yes	hing to report or	this part of the f	orm. Check this box an	d submit this form to the court with your	other schedules.
7. <b>Wh</b>	at kind of debt do	you have?	., ., .			
Ø					incurred by an individual primarily for a tatistical purposes. 28 U.S.C. § 159.	personal,
	Your debts are in this form to the co			ou have nothing to rep	oort on this part of the form. Check this b	oox and submit
				ne: Copy your total curi orm 122C-1 Line 14.	rent monthly income from Official	\$0.00
				ere e estados de la composição de la compo		

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

**MARCUS** 

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	s8,119.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$
9d. Student loans. (Copy line 6f.)	\$ <u>181,694.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	s0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$ 0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$189,813.00

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MADOUG				
Pebtor 1 MARCUS First Name	Middle Name	HUGHES  Last Name		
ebtor 2 pouse, if filing) First Name	Middle Name	Last Name		
nited States Bankruptcy Court	for the: Northern District of	Illinois		
ase number f known)	····			☐ Check if this is a
				amended filing
fficial Form 107				
tatement of F	 inancial Affai	rs for Indivi	iduals Filing for Ba	nkruptcy 12/
as complete and accurate ormation. If more space in mber (if known). Answer o	s needed, attach a separa	ried people are filing ate sheet to this form	together, both are equally respon n. On the top of any additional pag	sible for supplying correct les, write your name and case
art 1: Give Details A	About Your Marital Sta	itus and Where Yo	u Lived Before	
What is your current ma	arital status?			
Married				
✓ Not married				
During the last 3 years,	have you lived anywhere	other than where yo	ou live now?	
□ No	have you lived anywhere	_		Dates Debtor 2 lived there
☐ No ☑ Yes. List all of the pla		years. Do not include  Dates Debtor 1	where you live now.	lived there
☐ No ☑ Yes. List all of the pla	aces you lived in the last 3	years. Do not include  Dates Debtor 1 lived there	where you live now.  Debtor 2:  Same as Debtor 1	lived there  Same as Debtor
No Yes. List all of the pla  Debtor 1:	aces you lived in the last 3	years. Do not include  Dates Debtor 1  lived there	where you live now.  Debtor 2:  Same as Debtor 1	lived there
No Yes. List all of the pla  Debtor 1:  7617 N PAULI  Number Street	nces you lived in the last 3 t	Dates Debtor 1 lived there	where you live now.  Debtor 2:  Same as Debtor 1	lived there ☐ Same as Debtor From
No Yes. List all of the pla  Debtor 1:  7617 N PAULI	aces you lived in the last 3	Dates Debtor 1 lived there	where you live now.  Debtor 2:  Same as Debtor 1  Number Street	lived there ☐ Same as Debtor From
No Yes. List all of the pla  Debtor 1:  7617 N PAULI  Number Street  CHICAGO	NA  IL 60626	Dates Debtor 1 lived there	where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City State	lived there  ☐ Same as Debtor  From  To  ZIP Code
No Yes. List all of the plane  Debtor 1:  7617 N PAULI  Number Street  CHICAGO  City	NA  IL 60626  State ZIP Code	years. Do not include  Dates Debtor 1 lived there  From 05/01/2014	where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City State  Same as Debtor 1	lived there  ☐ Same as Debtor  From  To  ZIP Code  ☐ Same as Debtor
No Yes. List all of the plane  Debtor 1:  7617 N PAULI  Number Street  CHICAGO  City	NA  IL 60626	years. Do not include  Dates Debtor 1 lived there  From 05/01/201 To  From 04/01/200	where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City State  Same as Debtor 1	From  ZIP Code  Same as Debtor  From  To  Zip Code  From
No Yes. List all of the plane  Debtor 1:  7617 N PAULI  Number Street  CHICAGO  City  6167 N BROAL	NA  IL 60626  State ZIP Code	years. Do not include  Dates Debtor 1 lived there  From 05/01/2014	where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City State  Same as Debtor 1	lived there  ☐ Same as Debtor  From  To  ZIP Code  ☐ Same as Debtor
No Yes. List all of the plane  Debtor 1:  7617 N PAULI  Number Street  CHICAGO  City  6167 N BROAI  Number Street  APT #477  CHICAGO	NA  IL 60626 State ZIP Code  DWAY STREET	years. Do not include  Dates Debtor 1 lived there  From 05/01/201 To  From 04/01/200	where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City State  Same as Debtor 1  Number Street	Ilived there  Same as Debtor  From  To  ZIP Code  Same as Debtor  From  To  To
No Yes. List all of the plane  Debtor 1:  7617 N PAULI  Number Street  CHICAGO  City  6167 N BROAI  Number Street  APT #477	NA  IL 60626 State ZIP Code	years. Do not include  Dates Debtor 1 lived there  From 05/01/201 To  From 04/01/200	where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City State  Same as Debtor 1	Ilived there  Same as Debtor  From  To  ZIP Code  Same as Debtor  From  From
No Pebtor 1:  7617 N PAULI Number Street  CHICAGO City  6167 N BROAI Number Street  APT #477  CHICAGO City  Within the last 8 years,	NA  IL 60626 State ZIP Code  DWAY STREET  IL 60660 State ZIP Code  did you ever live with a s	years. Do not include  Dates Debtor 1 lived there  From 05/01/2014 To 05/01/2014	where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City State  Number Street  City State  City State	Ilived there  Same as Debtor From To  ZIP Code  From To  ZIP Code  To  ZIP Code  To
No Pebtor 1:  7617 N PAULI Number Street  CHICAGO City  6167 N BROAI Number Street  APT #477  CHICAGO City  Within the last 8 years,	NA  IL 60626 State ZIP Code  DWAY STREET  IL 60660 State ZIP Code  did you ever live with a s	years. Do not include  Dates Debtor 1 lived there  From 05/01/2014 To 05/01/2014	where you live now.  Debtor 2:  Same as Debtor 1  Number Street  City State  Number Street  Total Same as Debtor 1  City State  City State	Ilved there  Same as Debto From To  ZIP Code  Same as Debto From To  ZIP Code  To

**Explain the Sources of Your Income** 

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btor 1	MARCUS First Name Middle Name Last 1	HUGHES	Case nu	imber (if known)	
Fi If	id you have any income from employmen Il in the total amount of income you received you are filing a joint case and you have inco	I from all jobs and all busi	nesses, including part-ti	me activities.	ndar years?
.Z	No Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	<ul><li>✓ Wages, commissions, bonuses, tips</li><li>✓ Operating a business</li></ul>	\$12,866.80	<ul><li>☐ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul>	\$
	For last calendar year: (January 1 to December 31,2015 )	Wages, commissions, bonuses, tips  Operating a business	\$ 27,403.63	Wages, commissions, bonuses, tips Operating a business	\$
	For the calendar year before that: (January 1 to December 31, 2014)	₩ages, commissions, bonuses, tips	s 33,304.42	Wages, commissions, bonuses, tips	\$
Ind un ga	d you receive any other income during the clude income regardless of whether that income employment, and other public benefit payme mbling and lottery winnings. If you are filing at each source and the gross income from each source and the gross income from each source.	ome is taxable. Examples ents; pensions; rental inco a joint case and you have	of other income are alinome; interest; dividends; e income that you receive	money collected from laws ed together, list it only once	uits; royalties; and
	No Yes. Fill in the details.				
	Too. This will detaile.	Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:				\$
	the date you med for parkruptcy.		\$ \$		\$ \$
	For last calendar year:		\$		\$
	(January 1 to December 31, 2015 )	1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	\$		\$
	For the calendar year before that:		\$		\$
	(January 1 to December 31, 2015 YYYY)		\$		\$

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**MARCUS HUGHES** Case number (if known)\_ Debtor 1 First Name Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225\* or more? No. Go to line 7. Yes, List below each creditor to whom you paid a total of \$6,225\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Was this payment for... Amount you still owe Dates of Total amount paid payment ☐ Mortgage Creditor's Name Car Credit card Number Street Loan repayment Suppliers or vendors Other ZIP Code ■ Mortgage Creditor's Name ☐ Car Credit card Number Street Loan repayment Suppliers or vendors Other \_\_\_ City State ZIP Code

ZIP Code

☐ Mortgage

□ Loan repayment□ Suppliers or vendors□ Other

Car

Creditor's Name

Street

Number

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ebtor 1	MARCUS		HUGHES		Case number (if known)_	
DIO: 1	First Name Middle N	ame Last Name				
Insid corp ager such	orations of which you are nt, including one for a bu n as child support and ali	s; any general partners e an officer, director, pe siness you operate as a	; relatives of any or erson in control, or	general partners; p owner of 20% or r	artnerships of which more of their voting	who was an insider? In you are a general partner; securities; and any managing domestic support obligations,
	No Yes. List all payments to	an insider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name			\$	\$	
	Number Street					
	City	State ZIP Code	а <sub>н</sub> интория.			
	Insider's Name			\$	\$	
	Number Street		and the state of t			
	City	State ZIP Code				
an i Inclu	insider? ude payments on debts (	guaranteed or cosigned	by an insider.	payments or trans	fer any property o	n account of a debt that benefite
_	res. List an payments in	at benefice of moder.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment include creditor's name
	Insider's Name			\$	\$	
	Number Street					
	City	State ZIP Code				
	Insider's Name			\$	\$	
	Number Street					
	City	State ZIP Code	=			

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t 4: Identify Legal Actions, Repo	HUGHESast Name	Case number (if known	2)	
t 4: Identify Legal Actions, Repo				
ist all such matters, including personal inju	ptcy, were you a party in any lawsu			
ist all such matters, including personal inju nd contract disputes.	ary cases, small claims actions, divorce	es, conection suns, pateri	mity actions, supp	JOIL OF CUSTOMY INCOMECA
) No				
Yes. Fill in the details.				
	Nature of the case	Court or agency		Status of the cas
CADITAL ONE BANK	BREACH OF CONTRACT	- COOK COUNTY		Fil
Case title CAPITAL ONE BANK	(\$2,981.06)	Court Name		Pending
vs HUGHES, MARCUS	North-	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		On appeal Concluded
Casa aumbor 14MI142517		Number Street	11	Concluded
Case number 14W1142317	а <sub>райна</sub>	CHICAGO City Stat	IL te ZIP Code	
		,		
Case title CAPITAL ONE BANK	BREACH OF CONTRACT	COOK COUNTY	***************************************	Pending
	(\$1821.65)	Court Name		On appeal
vs HUGHES, MARCUS BEY		Number Street		Concluded
Case number 2014MI141855		CHICAGO	IL	
		City Stat	te ZIP Code	
fithin 1 year before you filed for bankrupheck all that apply and fill in the details be  No. Go to line 11.  Yes. Fill in the information below.		ssessed, foreclosed, ga	arnished, attach Date	ed, seized, or levied?  Value of the proper
Creditor's Name				<u> </u>
Number Street	Explain what happened			
	Property was repos	ssessed.		
villed Additional Assistance and account of the second of	Property was forecl			
City State 2tP	☐ Property was garnis			

Creditor's Name

Number Street

State ZIP Code

City

Property was repossessed.Property was foreclosed.Property was garnished.

Property was attached, seized, or levied.

Explain what happened

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**HUGHES** 

otor 1	MARCUS	HUGHES	Case number (if know	m)	
	First Name Middle Name Last f	Name			
	_				
rt 4:	Identify Legal Actions, Reposs	essions, and Foreclosure	s		
	in 1 year before you filed for bankrupt				
	all such matters, including personal injury	cases, small claims actions, di	vorces, collection suits, pate	rnity actions, supp	oort or custody modification
	contract disputes.				
N					
<b>4</b> Y	es. Fill in the details.				
		Nature of the case	Court or agency		Status of the cas
	ALL STATE INCLIDANCE	TORT - (\$3,615.26)	COOK COUNTY		_
•	Case title ALL STATE INSURAN		Court Name		Pending
_	vs HUGHES, MARCUS				On appeal
			Number Street		☑ Concluded
	Case number 2006M1017744		CHICAGO	<u>IL</u>	
			City St	ate ZIP Code	
(	Case title		Court Name		Pending
					On appeal
			Number Street		☐ Concluded
(	Case number				
			City Ste	ate ZIP Code	************
	es. Fill in the information below.	Describe the property	ıt	Date	Value of the proper
				200	Turas of the property
					\$
	Creditor's Name				Φ
	Number Street	Explain what happen	ed		
		Property was re			
		Property was fo			
		Property was g			
	City State ZIP Co	• •	ttached, seized, or levied.		
		Describe the property	<i>!</i>	Date	Value of the prope
		***************************************		·	\$
	Creditor's Name				
	N. or base Ottom	**************************************			
	Number Street	Explain what happen	ed		
			ou .		
		Property were re			
		Property was re	epossessed.		
		Property was fo	epossessed. preclosed.		
	City State ZIP Co	Property was fo	epossessed. preclosed.		

**MARCUS** 

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1	MARCUS First Name Middle Name Last	HUGHES	Case number (if kno	wn)	
	First Name Middle Name Last	Name			
Nith acco	in 90 days before you filed for bankru ounts or refuse to make a payment bed	ptcy, did any creditor, including a cause you owed a debt?	a bank or financial inst	itution, set off any a	mounts from your
Zίν		•			
<b>)</b> Y	es. Fill in the details.				
		Describe the action the creditor to	ook	Date action was taken	Amount
Ĉ	reditor's Name	-		nao lakon	
<u>.</u>	Discount Property and the second	_			\$
IN	umber Street				
-		-			
c	ity State ZIP Code	Last 4 digits of account number:	YYYY_		
		Last + digits of account manages.		<del></del>	
Vith	in 1 year before you filed for bankrupt	cy, was any of your property in th	ne possession of an as	signee for the benef	it of
redi	tors, a court-appointed receiver, a cus	stodian, or another official?			
ŽÍN					
<b>]</b> Y	es				
t 5:	List Certain Gifts and Contribu	tions			
/ithi	n 2 years before you filed for bankrup	tcy, did you give any gifts with a	total value of more tha	n \$600 per person?	
/ithi <b>Ž</b> ÍN	n 2 years before you filed for bankrup	tcy, did you give any gifts with a	total value of more tha	n \$600 per person?	
ZÍ N	o	tcy, did you give any gifts with a	total value of more tha	n \$600 per person?	
ZÍ N		tcy, did you give any gifts with a	total value of more tha	n \$600 per person?	
И <b>В</b>	o es. Fill in the details for each gift.  Gifts with a total value of more than \$600	tcy, did you give any gifts with a  Describe the gifts	total value of more tha	Dates you gave	Value
И <b>В</b>	o es. Fill in the details for each gift.		total value of more tha		Value
N 12 Y	o es. Fill in the details for each gift.  Gifts with a total value of more than \$600		total value of more tha	Dates you gave	Value
И <b>[</b> ]	o es. Fill in the details for each gift.  Gifts with a total value of more than \$600		total value of more tha	Dates you gave	Value \$
<b>й</b> ү	o es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person		total value of more tha	Dates you gave	Value \$\$
<b>й</b> ү	o es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person		total value of more tha	Dates you gave	<b>Value</b> \$\$
7 N	o es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person		total value of more tha	Dates you gave	Value \$\$
Pee	es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  erson to Whom You Gave the Gift		total value of more tha	Dates you gave	<b>Value</b> \$\$
7 N	es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  erson to Whom You Gave the Gift		total value of more tha	Dates you gave	<b>Value</b> \$\$
Pe Tinu	es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  erson to Whom You Gave the Gift		total value of more tha	Dates you gave	<b>Value</b> \$\$
7 N N Pe	es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  erson to Whom You Gave the Gift  where Street  y State ZIP Code  erson's relationship to you	Describe the gifts	total value of more tha	Dates you gave the gifts	\$\$
NU Pe	es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  erson to Whom You Gave the Gift  umber Street  y State ZIP Code		total value of more tha	Dates you gave	Value  \$ \$ Value
NU Pe	es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Prson to Whom You Gave the Gift  Imper Street  Y State ZIP Code  Prson's relationship to you  fts with a total value of more than \$600	Describe the gifts	total value of more tha	Dates you gave the gifts  Dates you gave	\$\$
Pee Gipe	es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Prson to Whom You Gave the Gift  Imper Street  Y State ZIP Code  Prson's relationship to you  fts with a total value of more than \$600	Describe the gifts	total value of more tha	Dates you gave the gifts  Dates you gave	\$\$
Pee Gipe	es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Prson to Whom You Gave the Gift  The person's relationship to you  fts with a total value of more than \$600 per person	Describe the gifts	total value of more tha	Dates you gave the gifts  Dates you gave	\$
Pee Gipe	es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Prson to Whom You Gave the Gift  The person's relationship to you  fts with a total value of more than \$600 per person	Describe the gifts	total value of more tha	Dates you gave the gifts  Dates you gave	\$\$
Pee Gipe	es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Prson to Whom You Gave the Gift  The person's relationship to you  fts with a total value of more than \$600 per person	Describe the gifts	total value of more tha	Dates you gave the gifts  Dates you gave	\$
N Y Pe	es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Prson to Whom You Gave the Gift  The person's relationship to you  fts with a total value of more than \$600 per person	Describe the gifts	total value of more tha	Dates you gave the gifts  Dates you gave	\$
N Y Pe	es. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  erson to Whom You Gave the Gift  where Street  y State ZIP Code  erson's relationship to you  fts with a total value of more than \$600 er person  rson to Whom You Gave the Gift	Describe the gifts	total value of more tha	Dates you gave the gifts  Dates you gave	\$

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btor 1	MARCUS	HUGHES	Case number (if known)	
	First Name Middle Name La	st Name		***************************************
With	nin 2 years before you filed for bankrı	aptcy, did you give any gifts or contrib	outions with a total value of more than	\$600 to any charity?
Z				
	Yes. Fill in the details for each gift or co	ntribution.		
	Gifts or contributions to charities	Describe what you contributed	Date you	Value
	that total more than \$600		contributed	
ō	Charity's Name	<b></b>		\$
_		_		s
		-	VPIANTAMe No PIANTAMente victorium are	Ψ
ī	Number Street			
-	City State ZIP Code	<u></u>		
rt 6:	List Certain Losses			
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the Include the amount that insurance has pa- claims on line 33 of Schedule A/B: Prope-	id. List pending insurance	Value of property lost
				\$
rt 7:	List Certain Payments or Trai	nsfers		
			your behalf pay or transfer any proper	ty to anyone
	consulted about seeking bankruptcy de any attorneys, bankruptcy petition pi	eparers, or credit counseling agencies for	or services required in your bankruptcy.	
Ø N		-	, , ,	
<b></b> Y	es. Fill in the details.			
		Description and value of any property	transferred Date payment o	r Amount of paymen
	Person Who Was Paid		transfer was made	
,	Number Street			\$
				\$
				\$
;	City State ZIP Code			
	Email or website address			
i	Person Who Made the Payment, if Not You			

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	MARCUS	HUGHES	Case number (# known)		
	First Name Middle Name	Last Name			
		55555 mm			
		Description and value of any pr	operty transferred	Date payment or transfer was made	Amount of
				uansiei was made	payment
	Person Who Was Paid	******			
		Managara.		<del></del>	\$
	Number Street				<b>c</b>
		AAA A A A A A A A A A A A A A A A A A			Ф
	City State ZIP Code				
	Email or website address	<del></del>			
	Person Who Made the Payment, if Not You				
	iin 1 year before you filed for bankru nised to help you deal with your cre			sfer any property t	o anyone who
	ot include any payment or transfer tha				
Z N	No.				
	es. Fill in the details.				
		Description and value of any pr	operty transferred	Date payment or	Amount of pay
		process and the second process and process and process and process are also and process and process are also and process are also and process are also are a	opony namonomou	transfer was	ranount of puy
	Person Who Was Paid	***************************************		made	
		MANAGAMA			\$
	Number Street	·			\$
	Number Street				\$ \$
	Number Street  City State 2IP Code				\$
	City State ZIP Code		erwise transfer any property t	o anyone, other tha	\$s
Withi trans	City State ZIP Code in 2 years before you filed for banks sferred in the ordinary course of you	ur business or financial affairs?			
Withi trans	City State ZIP Code in 2 years before you filed for banks sferred in the ordinary course of you de both outright transfers and transfer	ur business or financial affairs? rs made as security (such as the gra	anting of a security interest or m		
With trans Include Do no	City State ZIP Code in 2 years before you filed for banks sferred in the ordinary course of you de both outright transfers and transfer of include gifts and transfers that you	ur business or financial affairs? rs made as security (such as the gra	anting of a security interest or m		
Withitrans Included Do no	City State ZIP Code in 2 years before you filed for banks sferred in the ordinary course of you de both outright transfers and transfer ot include gifts and transfers that you like	ur business or financial affairs? rs made as security (such as the gra	anting of a security interest or m		
Withitrans Included Do no	City State ZIP Code in 2 years before you filed for banks sferred in the ordinary course of you de both outright transfers and transfer of include gifts and transfers that you	ur business or financial affairs? s made as security (such as the gra have already listed on this statemen	anting of a security interest or m nt.	ortgage on your pro	perty).
Withitrans Included Do no	City State ZIP Code in 2 years before you filed for banks sferred in the ordinary course of you de both outright transfers and transfer ot include gifts and transfers that you like	ur business or financial affairs? rs made as security (such as the gra	anting of a security interest or m at.	ortgage on your pro	perty).
Withing transfer included to the control of the con	City State ZIP Code in 2 years before you filed for banks sferred in the ordinary course of you de both outright transfers and transfer ot include gifts and transfers that you like	ur business or financial affairs? Is made as security (such as the grain have already listed on this statement of the grain of the statement of the secription and value of proper or the business of the secription and value of proper or the secription and the secreption and the s	anting of a security interest or m  nt.  Describe any property	ortgage on your pro	perty).  Date transf
With trans Inclu Do no M N N	City State ZIP Code in 2 years before you filed for banks sferred in the ordinary course of you de both outright transfers and transfer of include gifts and transfers that you l lo 'es. Fill in the details.  Person Who Received Transfer	ur business or financial affairs? Is made as security (such as the grain have already listed on this statement of the grain of the statement of the secription and value of proper or the business of the secription and value of proper or the secription and the secreption and the s	anting of a security interest or m  nt.  Describe any property	ortgage on your pro	perty).  Date transf
With trans Inclu Do no M N N	City State ZIP Code in 2 years before you filed for banks sferred in the ordinary course of you de both outright transfers and transfer ot include gifts and transfers that you l lo 'es. Fill in the details.	ur business or financial affairs? Is made as security (such as the grain have already listed on this statement of the grain of the statement of the secription and value of proper or the business of the secription and value of proper or the secription and the secreption and the s	anting of a security interest or m  nt.  Describe any property	ortgage on your pro	perty).  Date transf
With trans Inclu Do no M N N	City State ZIP Code in 2 years before you filed for banks sferred in the ordinary course of you de both outright transfers and transfer of include gifts and transfers that you l lo 'es. Fill in the details.  Person Who Received Transfer	ur business or financial affairs? Is made as security (such as the grain have already listed on this statement of the grain of the statement of the grain of the	anting of a security interest or m  nt.  Describe any property	ortgage on your pro	perty).  Date transf
Withh transe Include Do no N N Y	City State ZIP Code  in 2 years before you filed for banks sferred in the ordinary course of you de both outright transfers and transfer of include gifts and transfers that you l  for es. Fill in the details.  Person Who Received Transfer  Number Street	ur business or financial affairs? Is made as security (such as the gra have already listed on this statement  Description and value of proper transferred	anting of a security interest or m  nt.  Describe any property	ortgage on your pro	perty).  Date transf
Withitrans	City State ZIP Code  in 2 years before you filed for banks sferred in the ordinary course of you de both outright transfers and transfer of include gifts and transfers that you li lo Yes. Fill in the details.  Person Who Received Transfer  Number Street	ur business or financial affairs? Is made as security (such as the gra have already listed on this statement  Description and value of proper transferred	anting of a security interest or m  nt.  Describe any property	ortgage on your pro	perty).  Date transf
Withitrans	City State ZIP Code  in 2 years before you filed for banks sferred in the ordinary course of you de both outright transfers and transfer of include gifts and transfers that you l  for es. Fill in the details.  Person Who Received Transfer  Number Street	ur business or financial affairs? Is made as security (such as the gra have already listed on this statement  Description and value of proper transferred	anting of a security interest or m  nt.  Describe any property	ortgage on your pro	perty).  Date transf
Withit transaction in the control of	City State ZIP Code  in 2 years before you filed for banks sferred in the ordinary course of you de both outright transfers and transfer of include gifts and transfers that you I lo fes. Fill in the details.  Person Who Received Transfer  Number Street  City State ZIP Code  Person's relationship to you	ur business or financial affairs? Is made as security (such as the gra have already listed on this statement  Description and value of proper transferred	anting of a security interest or m  nt.  Describe any property	ortgage on your pro	perty).  Date transf
Withit transaction in the control of	City State ZIP Code  in 2 years before you filed for banks sferred in the ordinary course of you de both outright transfers and transfer of include gifts and transfers that you li lo Yes. Fill in the details.  Person Who Received Transfer  Number Street	ur business or financial affairs? Is made as security (such as the gra have already listed on this statement  Description and value of proper transferred	anting of a security interest or m  nt.  Describe any property	ortgage on your pro	perty).  Date transf
Withhtranse North	City State ZIP Code  in 2 years before you filed for banks sferred in the ordinary course of you de both outright transfers and transfer of include gifts and transfers that you I lo fes. Fill in the details.  Person Who Received Transfer  Number Street  City State ZIP Code  Person's relationship to you	ur business or financial affairs? Is made as security (such as the gra have already listed on this statement  Description and value of proper transferred	anting of a security interest or m  nt.  Describe any property	ortgage on your pro	perty).  Date transf
Withhtranse North	City State ZIP Code  in 2 years before you filed for banks sferred in the ordinary course of you de both outright transfers and transfer ot include gifts and transfers that you l lo fes. Fill in the details.  Person Who Received Transfer  Number Street  City State ZIP Code  Person's relationship to you  Person Who Received Transfer	ur business or financial affairs? Is made as security (such as the gra have already listed on this statement  Description and value of proper transferred	anting of a security interest or m  nt.  Describe any property	ortgage on your pro	perty).  Date transf
Withhtranse North	City State ZIP Code  in 2 years before you filed for banks sferred in the ordinary course of you de both outright transfers and transfer ot include gifts and transfers that you l lo fes. Fill in the details.  Person Who Received Transfer  Number Street  City State ZIP Code  Person's relationship to you  Person Who Received Transfer	ur business or financial affairs? Is made as security (such as the gra have already listed on this statement  Description and value of proper transferred	anting of a security interest or m  nt.  Describe any property	ortgage on your pro	perty). Date transf

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tor 1	MARCUS		HUGHES	Case number (# km	own)	
	First Name Mi	iddle Name Last Name			1	
Vith	in 10 years before	you filed for bankruptcy	, did you transfer any proper	ty to a self-settled tru	st or similar device of v	vhich you
		se are often called asset-		•		
<b>1</b>	-					
<b></b> Y	es. Fill in the detail:	<b>3</b> .				
		Do	escription and value of the prope	erty transferred		Date transfer
			. , , , , ,			was made
N	lame of trust					
						and the second s
t 8:	List Certain Fi	nancial Accounts, in	struments, Safe Deposit	Boxes, and Storag	e Units	
Vith	in 1 year before yo	u filed for bankruptcy, w	vere any financial accounts o	or instruments held in	your name, or for your	benefit,
	ed, sold, moved, o		•		•	
			ther financial accounts; certi		ares in banks, credit un	ions,
orok ZÍN	=	sion funds, cooperatives	s, associations, and other fir	nancial institutions.		
	io ′es. Fill in the detai	ile				
- I	es. I ill tile detai					
		Lê	ast 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved,	Last balance before closing or transfer
					or transferred	
	Name of Financial Institu	ition	xxx	☐ Checking		¢
			^^^	Savings	**************************************	Φ
	Number Street			Money market		
	w			☐ Brokerage		
i	City	State ZIP Code		Other		
		x	XXX-	Checking		\$
ı	Name of Financial Institu	ition		☐ Savings		
i	Number Street			_		
				-		
i	City	State ZIP Code				
	Number Street	State ZIP Code		☐ Money market ☐ Brokerage ☐ Other		
i	City	State ZIP Code				
			before you filed for bankrup	tcy, any safe deposit	box or other depository	for
ecui Zin	rities, cash, or othe	r valuables?				
	es. Fill in the detail	ls.				
			ho else had access to it?	Describe th	e contents	Do you st
		***				have it?
						□ No
ī	Name of Financial Institu	tion Nan	na			Yes
		wan	n•			
ī	Number Street	Nur	mber Street	<del></del>		
_						
		City	State ZIP Code			
- 7	City	City State ZIP Code	State ZIP Code			

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	MARCUS		HUGHES	Case number (if known)	
	First Name Mi	iddle Name Las	t Name	-	
22 Havo	vou stored proport	h, in a storago unit	or along other than your home	within 1 year before you filed for bankruptcy?	
ZŽ N	you stored propert	ty iii a Storage uiiit	or place other than your nome	within a year before you filed for pankruptcy?	•
□ Y <sub>1</sub>	es. Fill in the detail	ls.			
			Who else has or had access to i	t? Describe the contents	Do you still have it?
					□ No
	Name of Storage Facility	V	Name		Yes
	Number Street		Number Street	and the second s	
	***************************************		City State ZIP Code		
	City	State ZIP Code			
Part 9:	identify Pro	perty You Hold	or Control for Someone Els	9	
			omeone else owns? include an	ny property you borrowed from, are storing fo	г,
or ho	old in trust for som	eone.			
	es. Fill in the detai	ils.			
			Where is the property?	Describe the property	Value
	Owner's Name				\$
			N		
	Number Street		Number Street		
	Number Street		Number Street		
				ZIP Code	
	Number Street  City	State ZIP Code	City State	ZIP Code	
	City			ZIP Code	
Part 10	City  Give Details	About Environm	City State	ZIP Code	
Part 10 For the p	Give Details  ourpose of Part 10,  ronmental law mea	the following definences	City State  nental Information  nitions apply: te, or local statute or regulation	concerning pollution, contamination, release	es of
Part 10 For the part of the pa	Give Details  ourpose of Part 10,  ronmental law mea	the following definences, or any federal, states stances, wastes, or	City State  nental Information  nitions apply: te, or local statute or regulation	concerning pollution, contamination, release, surface water, groundwater, or other mediur	es of n,
Part 10 For the part hazar inclusions Site r	Give Details  Durpose of Part 10,  ronmental law mea  rdous or toxic subsiding statutes or re  means any location	the following definences, wastes, or gulations controlling, facility, or proper	nental information  nitions apply: te, or local statute or regulation r material into the air, land, soil, ng the cleanup of these substar	concerning pollution, contamination, release, surface water, groundwater, or other mediur	n,
Part 10 For the p Envir hazar inclu Site r utilize	Give Details courpose of Part 10, conmental law mea rdous or toxic sub- ding statutes or re means any location e it or used to own	the following definences, wastes, or gulations controlling, facility, or proper properate, operate, or utilize	nental Information  nitions apply: te, or local statute or regulation r material into the air, land, soil, ng the cleanup of these substar ty as defined under any enviror it, including disposal sites.	n concerning pollution, contamination, release, , surface water, groundwater, or other mediun nces, wastes, or material. nmental law, whether you now own, operate, o	n,
Part 10 For the part hazar inclu Site rutiliza	Give Details courpose of Part 10, conmental law mea rdous or toxic sub- ding statutes or re means any location e it or used to own	the following definences, wastes, or gulations controlling, facility, or proper perate, or utilize ans anything an en	nental Information  nitions apply: te, or local statute or regulation r material into the air, land, soil, ng the cleanup of these substar ty as defined under any enviror it, including disposal sites.	n concerning pollution, contamination, release, surface water, groundwater, or other mediun nces, wastes, or material.	n,
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Part 10 For the part includes Site rutilization substitution and the part and the p	Give Details  Durpose of Part 10,  ronmental law mea  rdous or toxic sub- ding statutes or re means any location e it or used to own rdous material mea tance, hazardous r  Il notices, releases my governmental u  o es. Fill in the detail	the following definences, wastes, or gulations controlling, facility, or proper ans anything an enmaterial, pollutant, and proceedings unit notified you that	nental Information  nitions apply: te, or local statute or regulation r material into the air, land, soil, ng the cleanup of these substar ty as defined under any enviror it, including disposal sites. vironmental law defines as a ha contaminant, or similar term. that you know about, regardles at you may be liable or potential	a concerning pollution, contamination, release, surface water, groundwater, or other mediur nees, wastes, or material.  Inmental law, whether you now own, operate, azardous waste, hazardous substance, toxic as of when they occurred.  Ily liable under or in violation of an environment	n, or ental law?
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	MARCUS		HUGHES	Case number (if known)	
	First Name M	liddle Name	Last Name		
				A-10	
		governmental un	nit of any release of hazardous mate	rial?	
<b>☑</b> ,	No Yes. Fill in the deta	.ila			
	res. riii iii tile deta	1115.	Governmental unit	Environmental law, if you know it	Date of notice
			GOVORNING MEN	Environmental levi, ii you iniovi ii	
	Name of site		Governmental unit	_	
	Number Street		Number Street	_	
			City State ZIP Code	_	
	City	State ZIP Code	è		
	,	<del></del>			
lave	you been a party	in any judicial o	r administrative proceeding under a	ny environmental law? Include settlen	nents and orders.
<b>Z</b> Í 1					
<b>」</b> \	es. Fill in the deta	iils.			
			Court or agency	Nature of the case	Status of the case
,	Case title				_
	***************************************		Court Name	<del></del>	Pending
					On appe
			Number Street		Conclud
7	Case number	<u>.</u>			
•	ase number		City State ZIP C	ode	
rt 1			Business or Connections to An		to any business?
Vith [	in 4 years before y	you filed for banl or or self-employ limited liability c		have any of the following connections ctivity, either full-time or part-time	to any business?
Vith ( (	in 4 years before y  A sole proprieto  A member of a  A partner in a p	ou filed for bant or or self-employ limited liability c artnership	kruptcy, did you own a business or yed in a trade, profession, or other a	have any of the following connections ctivity, either full-time or part-time	to any business?
Vith ( ( (	in 4 years before y A sole proprieto A member of a A partner in a p An officer, direc	ou filed for banl or or self-employ limited liability c artnership ctor, or managin	kruptcy, did you own a business or yed in a trade, profession, or other a company (LLC) or limited liability par	have any of the following connections ictivity, either full-time or part-time tnership (LLP)	to any business?
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r 1 MAR		Last N	HUGHES_	Case number (#known)
			Describe the nature of the business	Employer Identification number  Do not include Social Security number or ITIN.
Business N	ame			EIN:
Number 5	Street		Name of accountant or bookkeeper	Dates business existed
<u></u>		······································		From To
City	State	ZIP Code		
			tcy, did you give a financial stateme	ent to anyone about your business? Include all financial
istitutions, c Í No	reditors, or othe	r parties.		
Yes. Fill in	the details belo	w.		
			Date issued	
Name		- worders have been dearly within the	MM / DD / YYYY	
Maine			MM / DD / YYYY	
Number 5	Street			
***************************************				
City	State	ZIP Code		
12: Sign	Below			
answers are in connection	true and correct	. I understan Itcy case can	d that making a false statement, co	nments, and I declare under penalty of perjury that the incealing property, or obtaining money or property by fraud inprisonment for up to 20 years, or both.
Date 🕡	21/2016		Date	
	ch additional pag	jes to Yo <i>ur</i> S	tatement of Financial Affairs for Inc	dividuals Filing for Bankruptcy (Official Form 107)?
☑ No ☐ Yes				
	or agree to pay s	omeone who	o is not an attorney to help you fill o	out bankruptcy forms?
No Yes. Nam	e of person			Attach the Bankruptcy Petition Preparer's Notice,
	-			Declaration, and Signature (Official Form 119).

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formation to identify	your case:	
MARCUS First Name	Middle Name	HUGHES Last Name
First Name	Middie Name	£ast Name
Bankruptcy Court for the:	_NORTHERN	District of _ILLINOIS
,	MARCUS First Name First Name	First Name Middle Name

### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

<ol> <li>For any creditors that you listed in Part 1 of Schedule D: information below.</li> </ol>	or any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.						
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?					
Creditor's name: TOYOTA FINANCIAL SERVICES  Description of 2016 TOYOTA CAMERY property securing debt:	<ul> <li>☐ Surrender the property.</li> <li>☐ Retain the property and redeem it.</li> <li>☑ Retain the property and enter into a Reaffirmation Agreement.</li> <li>☐ Retain the property and [explain]:</li> </ul>	☑ No ☐ Yes					
Creditor's name:  Description of property securing debt:	□ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	□ No □ Yes					
Creditor's name:  Description of property securing debt:	□ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	□ No □ Yes					
Creditor's name:  Description of property securing debt:	□ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]:	□ No □ Yes					

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Debtor 1

MARCUS			HUGHES	Case number (If known)
iret Marna	emel/ abbits	Last Name		

Part 2:

List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

□ No □ Yes □ No □ Yes
□No
☐ Yes
☐ No
☐ Yes
□ No
☐ Yes
No
☐ Yes
□ No
☐ Yes
□ No
☐ Yes